



County Borough of West Ham.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1925.

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The state of the Public Health being so intimately connected with the health of the school children, this Report would be amplified if read in conjunction with the Report of the work of the School Medical Service for 1925.



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*TO HIS WORSHIP THE MAYOR, ALDERMEN AND
COUNCILLORS OF THE COUNTY BOROUGH
OF WEST HAM.*

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present to you my Annual Report on the work of the Public Health Department for the year 1925.

In accordance with the desire of the Ministry of Health, as contained in Circular 648, this Report is a survey one, dealing with the past five years. The principal changes which have taken place during that time are set out under their respective headings.

During the year, the following important and far-reaching Public Health measures have come into force:—

- A. The Public Health Act, 1925:
- B. The Public Health (Meat) Regulations:
- C. The Milk and Dairies (Consolidation) Act:
- D. The Tuberculosis Order, 1925:
- E. The Public Health (Prevention of Tuberculosis) Regulations and
- F. The Housing Act, 1925.

In order to carry out the extra legislation laid upon this Department in connection with the above-named Acts and Regulations, it was found necessary to appoint two additional officers (a Meat Inspector and a Veterinary Surgeon—who also acts as a Meat Inspector).

During the period under review a very comprehensive co-ordination has been established between this Department and the ancillary health services in the district and in the contiguous areas, also a further linking up of the work between the various sub-departments, especially in respect to Maternity and Child Welfare, Tuberculosis, and the School Medical Service.

In June, 1925, the Public Health Committee considered it advisable to replace the present obsolete and unhygienic method of collection of House Refuse by establishing a system of combined motor and horse traction (Pagefield System). In order, however, to co-ordinate this in the closest possible way with the cleansing of the Highways and Streets, it was agreed at a joint meeting of the Public Health Committee and the Highways and Parks Committee to transfer the responsibility for the collection of house refuse to the Borough Engineer's Department. In the

near future, therefore, a modern and vastly improved means of dealing with this highly important matter will be instituted.

The first Health Week to take place in West Ham was held (in conjunction with the Insurance Committee) from October 4th to 10th, details of the arrangements made are to be found in the body of this report. That the event proved very successful, was due in large measure to the whole-hearted co-operation of all those who were approached to help make it so.

A new Municipal Ante-Natal and Child Welfare Clinic will soon be opened in the Stratford District. It has also been decided to appoint a Lady Doctor to assist in Maternity and Child Welfare work.

A Sanatorium for children suffering from pulmonary tuberculosis has been a long-felt need, arrangements are now completed (and await the sanction of the Ministry of Health) for the erection on your Langdon Hills site, of an Institution to accommodate 40 tuberculous children.

A proposal to build an open-air swimming bath in West Ham Park is now under consideration, and it is to be hoped that this much desired measure will be achieved in due course.

A scheme has been prepared for the establishment of a colony at Ockenden to accommodate 500 mental defectives, and it seems probable that this scheme will soon receive official sanction.

In my last Annual Report I expressed the hope that this year would see some definite improvements in respect to the amelioration and safeguarding of the health of the populace. A study of the contents of this Report will prove that my hope was not ill-founded. I am hopeful of still further improvements, though it must be borne well in mind that the inauguration of health measures of various kinds will not, of itself, produce healthy citizens; this can only be achieved in the course of time by studious and painstaking attention to all matters, both great and small, which tend to raise or lower the general health of the community, either individually or collectively. It is essential also that the inhabitants should make the best possible use of the health facilities afforded to them.

I am indebted to the Council and to all the members of my staff for their loyal help in enabling me to carry out the manifold duties of this Department.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

F. GARLAND COLLINS,

M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H.,

Medical Officer of Health.

County Borough of West Ham.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1925.

Natural and Social Conditions.

West Ham is situated in latitude $51^{\circ} 30'$ to $51^{\circ} 33'$ N. and longitude $0^{\circ} 1'$ to $0^{\circ} 3'$ E., in the extreme south-west of the County of Essex and on the eastern side of the administrative County of London, from which it is separated by the windings of the River Lee and Bow Creek for $3\frac{1}{2}$ miles.

In shape it is an irregular rhomboid, some 2 miles from east to west, and 4 miles from north to south, comprising within its boundaries 4,706 acres. The northern and eastern sides of the Borough are contiguous to the populated district of Leyton and the County Borough of East Ham respectively. The southern boundary is formed by the river Thames for $2\frac{1}{8}$ miles. In elevation it is almost flat, varying from less than 5 feet to 45 feet above ordnance datum, about half the area being not more than 10 feet above that level, and consequently protected only from serious flooding by the river banks.

Chalk may be reached at depths varying from 100 to 150 feet, overlaid by green Thanet sands and Woolwich beds, on which rests 5 to 50 feet of London clay. In the north-eastern half of the Borough 16 feet to 20 feet of river drift gravel overlays the London clay, sloping down towards the river Lee and river Thames in the marshy clay and alluvium, a large part of the surface being made ground.

Summary of General Statistics.

Area (acres), 4,706.

Population—

Census, 1921, 300,860.

Estimated, 1925, 318,500.

Number of inhabited houses (1921), 47,995.

Number of families or separate occupiers (1921), 68,569.

Rateable value—

Poor Rate, £1,447,680.

General District Rate, £1,350,003.

Sum represented by a penny rate—General District Rate, £5,600.

Amount of Poor Law Relief, £797,249 8s. 8½d.

CHIEF OCCUPATIONS OF INHABITANTS.

West Ham is a typical industrial Borough. Large factories abound on the river frontages west and south; railway works employing thousands of regular hands are located in the north, and large docks—the staple support of casual labour—intersect the south. The rest of the area may be said to form the dormitory of artisans, clerks and others whose daily work is carried on in London and district, together with the local shops and retail businesses necessary for the welfare of their families. There is no particular industry calculated to specially affect the public health.

Extracts from Vital Statistics of the Year

The Births during 1925 numbered 7,017, classified as follows:—

	Total.		Male.		Female.
Legitimate	6,848	...	3,505	...	3,343
Illegitimate	169	...	94	...	75

giving a BIRTH RATE of 22.03 (Eng. and Wales 18.3.)

The Deaths numbered 3,428, viz., 1,799 Males, 1,629 Females, giving a DEATH RATE of 10.7 (Eng. and Wales 12.2).

Number of women dying in, or in consequence of, child birth :—

From Sepsis	8
From other causes	12
Maternal Mortality	2.85
Infant Mortality (Deaths of Infants under one year of age per 1,000 births)	65.98
(Eng. and Wales)	75. 0
Deaths from Measles (all ages)	32
Deaths from Whooping Cough (all ages)	81
Deaths from Diarrhœa (under two years of age)	93

VITAL STATISTICS OF THE WARDS OF THE BOROUGH DURING 1925.

WARDS.	Births.	Birth Rate.	Deaths.	Death Rate.	Infant Deaths.	Infant Mortality per 1,000 births	Natural increase Births over Deaths.	Estimated population middle of 1925.
New Town	401	20.35	266	13.50	22	54	135	19,702
Forest Gate	314	15.45	248	12.20	22	70	66	20,316
High Street	486	25.08	180	9.28	31	63	306	19,376
Broadway	318	19.87	192	12.00	31	97	126	16,000
Park	255	15.62	167	10.23	11	43	88	16,318
Upton	273	14.83	192	10.43	14	51	81	18,405
Plashet Road	306	18.45	166	10.00	16	52	140	16,585
West Ham	361	19.42	201	10.84	25	69	160	18,537
Plaistow	475	21.16	216	9.62	30	63	259	22,442
Bemersyde	233	15.13	141	9.16	14	60	92	15,393
Canning Town & Grange ..	650	25.56	283	11.12	51	78	367	25,430
Hudsons	483	22.54	236	11.01	25	51	247	21,423
Ordnance	581	27.14	218	10.18	34	58	363	21,407
Beckton	566	26.60	215	10.10	42	74	351	21,278
Tidal Basin	779	33.49	279	11.99	68	87	500	23,256
Custom House & Silvertown ..	536	23.68	228	10.07	27	50	308	22,632
County Borough	7,017	22.03	3,428	10.7	463	65.98	3,589	318,500

Births.

The number of births registered in the Borough during the year was 7,834 (4,021 males and 3,813 females) but of this total 962 were children of non-residents who came to be confined in one or other of the maternity hospitals or were visiting friends, while 145 West Ham women were confined outside the Borough. Suitable adjustment makes the net West Ham Births 7,017 (3,599 males and 3,418 females); 169 of these (94 males and 75 females) were illegitimate.

Calculated on the Registrar General's estimate of the population of the Borough at the middle of 1925, viz., 318,500, the birth rate for the year was 22.03, being the lowest ever recorded for the Borough. 7,520 live births and 196 still births were notified within 36 hours of birth in accordance with the notification of Births Act 1907.

Deaths.

The number of deaths registered during the year was 2,334, but of these 174 occurred in persons not belonging to the Borough, while the deaths of 1,268 residents of West Ham occurred in various institutions and districts elsewhere, making the total net deaths attributable to the Borough number 3,428, of which 1,799 were males and 1,629 females.

The distribution of these deaths to their various causes will be found later in this report, but the grand total of 3,428 from all causes gives an annual death-rate of 10.7 per 1,000 of the estimated population. It may be of interest to compare the annual death-rate for England and Wales, which was 12.2 per 1,000 of the total population, and that for the 105 County Boroughs and Great Towns, including London, which was 12.2.

Deaths in Public Institutions.

The increasing use made of the facilities for Institutional treatment is shown by the subjoined table (which also serves to some extent as an index of prevailing distress). The larger Institutions serving the Borough, such as Whipps Cross Hospital and the Central Home of the Board of Guardians and the Borough Mental Hospital, are situate outside the Borough boundary, while in addition many West Ham residents are received into the London Hospitals and Institutions elsewhere. Similarly the Public Institutions within the Borough (Queen Mary's Hospital for the East End, St. Mary's Hospital, Plaistow Maternity Charity, Children's Hospital (Balaam Street), Royal Albert Dock Hospital and Forest Gate Sick

Home) receive patients from the surrounding districts whose deaths are registered in the district, but have to be excluded from tabulation as transferable to West Ham.

It will be noted that in the former group (outside Institutions) 85 infants and 1,194 persons over the age of one year died during the year, and in the latter group (inside Institutions) 135 infants and 301 elders died, of which numbers 38 infants and 118 elders were non-residents of the Borough. The net deaths of West Ham residents in Public Institutions were 182 infants and 1,377 persons of one year and upwards, making a total of 1,559 institutional deaths as compared with 1,869 deaths in private residences, *i.e.*, over 45 per cent. of the deaths during the year occurred in Public Institutions.

DEATHS IN OUTSIDE INSTITUTIONS:—

	Under 1 year	1 year and upwards.
Whipps Cross Hospital	43	... 494
Central Home	7	... 386
Dagenham Sanatorium	—	... 51
Goodmayes Mental Hospital	—	... 46
Residents dying in London Institutions, etc.	35	... 218

DEATHS IN INSIDE INSTITUTIONS:—

Plaistow Hospital	6	... 43
Queen Mary's Hospital for East End	56	... 111
St. Mary's Hospital	55	... 60
Plaistow Maternity Charity	10	... 3
Royal Albert Dock Hospital	—	... 39
Children's Hospital, Balaam Street	1	... 3
Forest Gate Sick Home	6	... 28
Other Places, <i>e.g.</i> , Docks	1	... 13
	<hr/> 220	... 1495
Non-residents dying in Inside Institutions ...	38	... 118
	<hr/> 182	.. 1377
Net West Ham Deaths in Institutions	<hr/> 1559	

Causes of Death at Different Periods of Life in the County Borough of West Ham during 1925.

CAUSES OF DEATH.		Sex.	All Ages	0—	1—	2—	5—	15—	25—	45—	65—	75—
ALL CAUSES	..	M	1,799	266	74	58	61	90	247	452	329	222
1 Enteric Fever ..	..	F	1,629	197	55	60	50	91	182	389	262	343
2 Small-pox ..	..	M	2	..	..	..	..	..	2	..	..	..
3 Measles ..	..	F	2	..	..	..	1	..	1	..	..	..
4 Scarlet Fever ..	..	M	20	3	9	7	1	..	..	..	..	..
5 Whooping Cough ..	..	F	12	1	5	5	1	..	..	..	..	..
6 Diphtheria ..	..	M	4	..	1	1	2	..	..	..	..	..
7 Influenza ..	..	F	2	1	1	..	..	..	..	..	..	..
8 Encephalitis Lethargica ..	..	M	36	20	8	..	..	..	..	..	..	..
9 Meningococcal Meningitis ..	..	F	45	19	12	13	1	..	..	..	..	..
10 Tuberculosis of Respiratory System..	..	M	7	..	2	2	3	..	..	..	..	..
11 Other Tuberculous Diseases ..	..	F	11	..	3	6	2	..	..	..	..	..
12 Cancer, Malignant Disease ..	..	M	27	1	..	1	1	..	..	..	..	..
13 Rheumatic Fever ..	..	F	35	1	1	..	1	..	..	..	..	..
14 Diabetes ..	..	M	4	..	..	..	..	..	..	..	..	..
15 Cerebral Haemorrhage, etc. ..	..	F	1	..	..	..	..	..	..	..	..	..
16 Heart Disease ..	..	M	2	..	..	..	..	..	..	..	..	..
17 Arterio-sclerosis ..	..	F	191	..	..	1	5	37	84	57	6	1
18 Bronchitis ..	..	M	118	..	..	..	4	48	39	24	2	1
19 Pneumonia, all forms ..	..	F	39	5	10	8	4	3	6	3	..	..
20 Other Respiratory Diseases ..	..	M	26	2	2	9	5	2	3	3	..	..
21 Ulcer of Stomach, or Duodenum ..	..	F	172	..	..	..	..	2	8	79	63	20
22 Diarrhoea, &c. ..	..	M	186	..	..	..	..	1	28	89	44	24
23 Appendicitis and Typhlitis ..	..	F	9	..	..	..	4	2	1	1	1	1
24 Cirrhosis of Liver ..	..	M	17	..	..	..	8	5	3	..	4	1
25 Acute and Chronic Nephritis..	..	F	10	..	..	..	..	..	2	3	3	..
26 Puerperal Sepsis ..	..	M	7	..	..	..	..	..	2	..	..	..
27 Other Accidents and Diseases of Pregnancy and Parturition ..	..	F	72	..	..	..	..	..	..	..	..	..
28 Congenital Debility and Malformation, Pre-mature Birth ..	..	M	77	..	..	..	..	..	..	..	..	..
29 Suicide ..	..	F	174	..	..	..	5	4	21	63	53	19
30 Other Deaths from Violence ..	..	M	237	..	..	..	5	9	22	77	63	27
31 Other defined Diseases..	..	F	50	..	..	..	..	..	1	8	22	61
32 Causes ill-defined or unknown..	..	M	36	..	..	..	..	..	..	6	13	17
	..	F	158	13	1	2	1	1	7	29	49	56
	..	M	167	9	3	1	1	..	2	25	43	83
	..	F	189	44	24	14	2	5	25	43	17	15
	..	M	166	37	15	16	7	3	15	36	16	21
	..	F	14	1	..	1	..	..	2	5	2	3
	..	M	16	1	..	..	1	..	..	6	1	7
	..	F	29	..	..	..	..	..	13	9	7	..
	..	M	5	..	..	..	..	..	3	2	3	..
	..	F	56	45	6	1	1	1	1	2	1	1
	..	M	48	36	6	1	..	..	..	3	1	..
	..	F	11	..	..	1	6	..	2	1	1	..
	..	M	6	..	..	..	..	..	1	6	1	..
	..	F	9	..	..	..	..	..	2	3	1	..
	..	M	5	..	1	..	..	..	1	8	17	8
	..	F	64	..	..	..	3	2	10	22	11	4
	..	M	51	..	..	..	1	2	10	23	..	..
	..	F	8	..	..	..	..	..	8	..	..	..
	..	M	12	..	..	..	..	2	10	..	..	..
	..	F	80	78	..	1	..	..	..	1	3	1
	..	M	65	63	..	..	..	..	1	6	6	4
	..	F	17	..	..	..	..	..	7	5	5	8
	..	M	9	..	..	..	..	1	3	28	43	47
	..	F	98	12	4	7	9	14	14	2	6	8
	..	M	29	7	..	2	1	1	2	3	5	8
	..	F	254	44	7	6	11	18	29	49	43	47
	..	M	227	20	6	6	10	11	25	41	25	83
	..	F	1	..	..	..	..	..	..	1	..	..
	..	M	1	..	1	..	..	..	..	..	..	..

Chief Vital Statistics since 1877.

Year.	Population.	Births	Birth Rate.	Deaths.	Death Rate.	Infant Deaths.	Infant Mortality Rate.
1877	112,541	4,149	36.8	1,817	16.1	530	128
1878	115,144	4,491	39.0	2,147	18.6	733	163
1879	120,747	4,862	40.2	2,113	17.5	688	141
1880	124,350	5,164	41.5	2,371	19.0	793	153
1881	128,953	5,488	42.5	2,409	19.4	745	136
1882	136,548	5,907	43.2	2,586	18.9	874	148
1883	144,143	6,014	41.7	2,693	18.6	897	149
1884	151,737	6,563	43.2	3,057	20.1	1,035	157
1885	159,334	6,547	41.0	3,503	21.9	1,070	163
1886	166,936	7,075	41.7	3,151	18.8	1,060	149
1887	174,523	6,865	39.1	3,286	18.7	723	105
1888	182,118	6,867	38.5	2,848	18.0	905	131
1889	189,713	6,947	38.5	2,883	18.0	907	130
1890	197,308	7,063	38.5	3,977	21.7	1,142	161
1891	206,463	7,911	38.2	3,952	19.1	1,191	150
1892	212,703	8,013	36.9	4,019	18.6	1,225	158
1893	218,942	8,026	35.3	4,565	20.0	1,387	172
1894	225,184	8,089	33.9	4,026	18.2	1,123	139
1895	231,426	8,591	35.9	4,656	20.9	1,452	169
1896	237,665	8,519	35.4	4,395	18.9	1,395	163
1897	243,908	8,761	35.8	4,486	18.3	1,535	175
1898	250,145	8,750	34.9	4,594	18.3	1,525	174
1899	256,386	8,779	34.2	5,213	20.3	1,770	201
1900	262,627	8,885	33.8	5,156	19.6	1,671	188
1901	268,868	9,434	35.0	4,910	18.2	1,589	168
1902	270,076	9,553	35.3	4,858	17.9	1,382	144
1903	272,250	9,478	34.8	4,394	16.1	1,344	142
1904	274,424	9,276	33.3	4,836	17.6	1,467	158
1905	276,598	9,018	32.5	4,574	16.5	1,341	148
1906	278,772	9,193	32.9	4,610	16.5	1,270	138
1907	280,946	8,759	31.1	4,412	15.7	1,078	123
1908	283,121	9,214	32.5	4,364	15.4	1,089	118
1909	285,471	8,730	30.6	4,435	15.1	1,087	123
1910	287,471	8,646	30.0	3,773	13.1	866	100
1911	289,646	8,642	29.8	4,561	15.7	1,223	141
1912	291,900	8,642	29.6	4,146	14.2	889	102
1913	294,223	9,125	30.5	4,312	14.4	984	107
1914	296,570	8,848	29.8	4,425	14.9	957	108
1915	294,396	8,380	28.4	4,744	16.1	940	112
1916	287,969	8,377	29.1	4,233	14.7	828	112
1917	271,934	6,701	24.6	4,203	15.4	707	105
1918	262,858	6,021	22.9	5,492	20.8	700	116
1919	287,966	7,132	24.7	3,946	13.7	619	86
1920	299,440	9,723	32.4	3,888	12.9	716	73
1921	300,903	8,242	27.3	3,712	12.3	615	74
1922	304,738	7,959	26.1	4,124	13.5	641	80
1923	314,400	7,803	24.8	3,331	10.5	466	59
1924	317,400	7,202	22.6	3,652	11.5	564	78
1925	318,500	7,017	22.0	3,428	10.7	463	65

During the Spring and early Summer, 1925, an outbreak of Chickenpox occurred in which many of the cases were of a severe type. The Medical Officer of Health was called into consultation by several different private Practitioners in regard to cases suspected to be Smallpox. In one case the diagnosis was so very doubtful that I deemed it advisable to seek the opinion of Dr. Wanklyn, the consulting specialist for Smallpox of the London County Council. Dr. Wanklyn very kindly at once came to see the child. Fortunately this case, as also all the others, proved not to be Smallpox.

In November, 1925, a severe outbreak of Measles occurred. The cases were fairly evenly distributed throughout the Borough. Though Measles is not notifiable in West Ham, the great majority of cases come to the knowledge of the Medical Officer of Health by means of the Health Visitors, the School Attendance Officers, and other sources. The homes were visited, advice given, special leaflets distributed and, in addition, posters published on all the hoardings throughout the Borough. (See page 32.)

At the time of writing (March, 1926) the epidemic is greatly on the wane, but it has, nevertheless, caused the death of a number of children and impaired the general health of many others. Isolation of the cases, except in very severe or complicated cases which are able to be admitted to hospital is, in the main, impracticable, owing to the grossly over-crowded condition of so many of the dwellings.

General Provision of Health Services.

HOSPITALS.

(1) The Plaistow Fever Hospital (opened as two wards in 1896 and as to the computed Hospital designed by the late Edwin T. Hall in 1901) now contains 210 beds, originally allocated for the reception of scarlet fever, diphtheria and enteric fever cases, with 15 isolation beds for mixed or staff cases. The variable incidence of these diseases in recent years has enabled the Medical Superintendent to receive and treat many other infectious cases as well as to admit special cases for teaching purposes, including severe Measles, Tubercular Peritonitis, Encephalitis Lethargica, etc.

(2) Dagenham Smallpox Hospital, situate about 9 miles from the Borough, occupies a site of $6\frac{1}{2}$ acres, enclosed within the Rookery farm of 119 acres, owned and cultivated by the

Council. It consists of permanent buildings, capable of accommodating 50 patients with the administrative staff required for their care, together with temporary iron buildings sufficient for a further 300 cases. The permanent buildings were opened in 1899, and the Hospital is a safeguard in epidemic periods of smallpox to the greater part of London-over-the-Border, as by agreement eleven other authorities contribute to the maintenance of the Hospital in consideration of West Ham undertaking to receive and treat all the smallpox patients sent to the Hospital by those authorities, viz., Barking, East Ham, Romford Joint Hospital Board, Ilford, Wanstead, Waltham Joint Hospital Board, Brentwood, Billericay, Loughton, Epping Rural, Epping Urban, Ongar Rural.

Under the Tuberculosis Scheme formulated after the passing of the National Health Insurance Act, the Council were permitted to use Dagenham Hospital as a Temporary Sanatorium for Adults with Pulmonary Tuberculosis, but owing to an outbreak of smallpox at Easter, 1920, the Hospital had to be promptly cleared of consumptive patients and revert to its primary use, a costly and very inconvenient undertaking, as only 30 smallpox cases were admitted. Fortunately in 1922 the Council was enabled to enter into agreement with the Orsett Joint Hospital Board whereby the latter authority will admit sporadic cases of smallpox, up to 20 in number, sent to their Hospital by West Ham, thus enabling the Council to continue using Dagenham Hospital for the reception of Tuberculosis until the increasing pressure on the accommodation of the Orsett Hospital compels the Council to re-open Dagenham Hospital for smallpox cases.

During the year 1924-25, 24 additional beds for tuberculous cases were added, bring the total accommodation up to 128.

A very large number of houses are being built in the Dagenham Area, and the site occupied by the Smallpox Hospital (Temp. Tuberculosis Sanatorium), though getting more valuable from a financial point of view, is becoming increasingly unsuitable for the purpose of isolating smallpox, nor is it altogether desirable as a Sanatorium for Tuberculosis. The population of Dagenham has, during the past five years, increased from 9,127 to 38,000, and building is still proceeding. A part of the site in the S.W. corner has been cut off by the Romford Rural Council in connection with their new road-making scheme, and the Dagenham Spur of the new road to Southend, runs along the border of the site only a quarter of a mile from the Hospital itself. It should become a matter of very serious consideration for the Council as to whether or not

Dagenham Hospital as at present situated would be a suitable Institution for dealing with a serious epidemic of smallpox, taking into full account the very large area which it would have to serve, and also the danger to the metropolis of any breakdown in the efficiency of dealing with an Epidemic, seeing that many thousands of people from the area in question carry out their daily work in the City and travel to and from their work under over-crowded and insanitary conditions.

(3) The Grange Convalescent Home consists of a residential Institution with 7 acres of grounds, together with 61 acres of land situated at Harold Wood, being about 9 miles from the Borough. It was opened on 22nd February, 1909, for the reception of scarlet fever convalescents, and is capable of accommodating 60 patients. Owing to the fall in the number of scarlet fever cases the Institution has, during the last 3 years, been used for the reception of diphtheria convalescents.

HOSPITALS SUBSIDIZED BY COUNCIL.

(4) Plaistow Maternity Hospital (see page 110).

(5) Queen Mary's Hospital—Maternity and Out-Patients for Tonsils and Adenoids (see page 110).

(6) St. Mary's Hospital—Children and Infants under 5 (see page 110).

(7) Children's Hospital, Balaam Street (see page 110).

AMBULANCE SERVICE.

The Council has two Motor Ambulances for the removal of infectious patients to hospital, and two ambulances for removing bedding, clothing, or other infected material to the disinfecting station.

There are also two motor ambulances for transference of non-infectious and accident cases to or from institutions. The latter ambulances made 959 journeys during the year. In 356 cases persons were removed from one address to another within the Borough. In 603 cases from an address within the Borough to an institution outside, or *vice versa*. Provision is made for a Nurse to accompany the patient, and hot bottles are supplied during the cold weather.

Mutual arrangements are in existence between West Ham, the County Borough of East Ham, and the District of Barking for reciprocal use of ambulances on call in case of emergency should the ambulance of one or other Authority be unavailable, and 16 journeys were made in this connection.

Facilities for obtaining ambulances through Tram Conductors and the Police have been made, and transparencies are displayed on all West Ham cars giving full information. Notices to the same effect are exhibited at all the Council's Conveniences and Fire Stations.

The following table sets out the nature of the cases removed:—

Abscess	5	Internal Trouble	66
Appendicitis	75	Jaundice	1
Arthritis	1	Kidney Trouble	9
Attempted Suicide	18	Lockjaw	1
Bright's Disease	1	Loss of Memory	4
Broken Ribs	10	Lunatic	2
Bronchitis	5	Massage	1
Bruises	1	Mastoid	2
Burns	5	Maternity Cases	80
Cancer	1	Measles	1
Cerebral disease	1	Nephritis	2
Collapse	46	Neuritis	1
Dislocated Shoulder	5	Obstruction	2
Dog Bite	1	Operation	11
Eclampsia	1	Peritonitis	1
Erysipelas	1	Pneumonia & Pleurisy	21
Fall	3	Poisoning, Blood	5
Fit	62	Removal home from Hos-	
Fractured Femur	2	pital	4
Fractured Pelvis	1	Rheumatic Fever	1
Fractured Tibia	2	Rheumatism	2
Gallstones	4	Rupture	5
Gastric Ulcers	6	Shock	8
Gastritis	1	Sleepy Sickness	2
Hæmorrhage	25	Strangulated Hernia	7
Heart Trouble	11	Sunstroke	2
Influenza	1	Suffocation	1
Injured Head, Back (Con-		T.B. Meningitis	2
cussion, etc.)	195	Throat Trouble	4
Injured Hands and Arms..	13	Tumour	1
Injured Legs and Feet	188	Ulcerated Stomach	2
Injured Thigh	13	X-Ray	4

School Clinics.*

Stratford Clinic, 84, West Ham Lane, E.	2 Dental Clinics 1 Minor Ailment Clinic.
Balaam Street Clinic, Plaistow, E.	1 Minor Ailment Clinic. 1 Eye Clinic.
Rosetta Road Clinic, Custom House, E.	1 Minor Ailment Clinic.
Swanscombe St. Clinic, Canning Town, E.16.	1 Minor Ailment Clinic. 1 Dental Clinic.

All Clinics are used as Inspection Clinics, and are provided by the Local Education Authority.

Tuberculosis Dispensary: Balaam Street, Plaistow.

There are 8 Maternity and Child Welfare Centres subsidised by the Council (see page 110) in addition to one Municipal Infant Welfare Clinic.

For table of Hospitals treating Venereal Disease under the L.C.C. Scheme (see page 96).

* See Ministry of Health Circular 648, dated 10th December, 1925.

Public Health Staff.*

NAME.	QUALIFICATIONS.	OFFICES HELD. (Wholetime appointments except where otherwise stated.)
Dr. F. Garland Collins	M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H.	Medical Officer of Health, Chief Administrative Tu- berculosis Officer and School Medical Officer.
Dr. F. B. Skerrett	M.B., B.Sc. (Lond.), M.R.C.S., L.R.C.P., D.P.H.	Assistant Medical Officer of Health and Senior Assistant School Medical Officer.
Dr. D. MacIntyre	M.D. (Glasgow), D.P.H.	Medical Superintendent Plaistow Fever Hospital.
Dr. E. James	M.B., Ch.B. (Aberdeen)	Resident Medical Officer Plaistow Fever Hospital
Dr. P. A. Galpin	M.D., D.P.H.	Tuberculosis Officer.
Dr. W. R. Kilgour	M.R.C.S. (Eng.), L.R.C.P. (Lond.)	Assistant Tuberculosis Officer.
Dr. G. M. Mayberry	L.A.H. (Dublin), L.R.C.P. (Ireland).	Medical Superintendent Dagenham Sanatorium.
Dr. Constance M. Willis	M.R.C.S. (Eng.), L.R.C.P. (Lond.), B.S.	Assist. Resident Medical Officer Dagenham Sana- torium.
Mr. A. McCunn	M.R.C.V.S.	Veterinary Surgeon (part- time officer).
Miss R. Alefs	General Nursing, C.M.B., Fever Nursing Certifi- cate.	Health Visitor.
Miss A. E. Bradley	General Nursing, C.M.B., Royal Sanitary Institute	Do.
Miss B. H. Clipstone	General Nursing, C.M.B.	Do.
Miss A. Connolly	General Nursing, Health Visitor's Certificate	Do.
Miss M. Cross	General Nursing, C.M.B., Fever Nursing Certifi- cate	Do
Mrs. N. C. Gibbins	General Nursing, C.M.B., Health Vis. and Fever Nursing Certificate	Do.
Miss M. Grierson	General Nursing, C.M.B.	Do.

NAME.	QUALIFICATIONS.	OFFICES HELD. (Wholetime appointments except where otherwise stated.)
Miss M. E. Hopwood	General Nursing, C.M.B., San. Inst. Examn. Board	Health Visitor.
Miss A. E. Lunn	General Nursing, C.M.B.	Do.
Miss L. Martin	General Nursing, C.M.B., Board of Education Diploma	Do.
Miss M. B. Wallace	General Nursing, C.M.B.	Do.
Miss E. B. Welch	General Nursing, C.M.B., Board of Education Diploma	Do.
Miss A. S. Billing	Diploma Sanitary Inst., Advanced Physiology and Hygiene, Science & Art, Kensington	Sanitary Inspector.
Miss C. M. Heaviside	San. Insp. Cert. Royal San. Inst., Advanced Physiology & Hygiene (Kensington), St. John's Ambulance Nursing and First Aid, London City and Guilds Cookery Certificate.	Do.
Miss B. M. Keogh	San. Insp. Cert. London Examn. Board, Health Visitor's Cert. Sanitary Inst., L.C.C. Teachers' Certificates in First Aid, Infant Care, Home Nurs- ing, Health	Do.
Miss M. Monkhouse A.R.S.I.	Certificate General Nurs- ing and Certificate of Q. V. J. I. as Nurse and as Superintendent of Queen's Nurses,* San. Insp. Royal San. Insti- tute, San. Insp. San. Inspectors' Association *Registered Nurse and Member of the College of Nursing.	Do.
Mr. B. G. Bannington M.S.I.A.	San. Insp. Cert. R. San. Inst., Cert. of London Sch. of Economics (Lond. University) for Social Service and Administra- tion, Honoursman and Gilchrist Medallist (Lond. University Extension) for Public Administration	Do. Insp. under Rag Flocks Act.
Mr. B. J. Driscoll	Cert. San. Insp.'s Examn. Board, London.	Sanitary Inspector.

NAME.	QUALIFICATIONS.	OFFICES HELD. (Wholetime appointments except where otherwise stated.)
Mr. J. Dyke	Cert. San. Inspr. Royal San. Inst., Cert. Building Constn. West Ham Tech. Institute	Sanitary Inspector. Inspr. under Rag Flocks Act.
Mr. T. R. Harris, A.R.San.I., M.S.I.A.	Cert. San. Inspr., Meat Inspr. Royal San. Inst. Cert. San. Inspr., Meat Inspr. San. Inspectors' Board. Cert. San. Science, 1st Class, Battersea Poly- technic	Sanitary Inspector. (Appointed Meat Inspr.).
Mr. John F. Mules, M.S.I.A.	Cert. San. Inspr., Meat Inspr. Royal San. Inst.	Do.
Mr. H. E. Parker, M.S.I.A.	Dip. San. Science, Lond. Cert. San. Inspr. Royal San. Inst.	Sanitary Inspector. Inspr. under Rag Flocks Act.
Mr. A. T. Plackett	Cert. San. Inspr. Royal San. Inst.	Do.
Mr. W. H. Roberts, M.S.I.A.	Cert. San. Inspr. (1892) Royal San. Inst. Prizeman Building Const. (Honours) Prizeman Civil Engineer- ing (Survey Sec.) West Ham Tech. Inst.	Do.
Mr. Chas. Smith, M.S.I.A.	Cert. San. Inspr. (1894) Royal San. Inst. Cert. Building Const. (Adv.) Science & Art Dept, S. Kensington	Do.
Mr. H. A. Smith	Cert. San. Inspr. Royal San. Inst.	Sanitary Inspector.
Mr. E. G. Simmons,	Cert. San. Inspr. (1912) Royal San. Inst.	Do. Inspr. under Rag Flocks Act.
Mr. G. H. Wilson	Cert. San. Inspr. Royal San. Inst. Cert. Problems of Life and Health (Merit) London University	Do.
Mr. E. F. Hughes, M.S.I.A., A.R.S.I.	Cert. San. Inspr. Royal San. Institute.	Inspector of Food.
Mr. E. J. Ferrier		Shops Inspector.
Miss E. D. Rayment	General Nursing	Supervising Nurse under Mental Deficiency Act.

Public Health Administrative Staff.*

Mr. J. A. Cheatle	Chief Clerk.
„ F. W. Bromley	Senior Clerk.
„ H. R. Cole	Clerk.
„ C. A. Haigh	do.
„ F. H. Barker	do.
„ J. Sabin	do.
„ A. Clark	do.
Miss V. M. Busby	do.
„ W. I. Compton	do.

TUBERCULOSIS DISPENSARY.*Nurses.**Clerks.*

Mrs. E. Siggins, Sister-in-Charge.	Mr. W. Pike.
Miss E. J. Egerton, Nurse.	Miss M. F. Bush.
Mrs. Z. Griffin, do.	
Miss K. E. Pottinger, do.	

PLAISTOW HOSPITAL.*Steward.**Matron.**Clerks.*

Mr. F. Milsted.	Miss M. Drakard.	Mr. J. Regan.
		„ W. Liddall.

DAGENHAM.*Steward.**Matron.*

Mr. F. Milsted.	Miss E. Jones.
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DISINFECTORS.

Mr. G. Palmer.	Mr. G. J. Howes.
„ H. J. Murty.	„ W. Hubbard.

MORTUARY KEEPERS.

Mr. J. Gould.	Mr. H. B. West.
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In addition, the West Ham Education Authority have a staff of 6 Medical Officers, 3 Dental Surgeons, 23 Nurses, 9 Clerks, and also 2 Consulting Oculists, who work in the closest possible co-operation with the above staff.

* A detailed list of the Staff is included in this Report by the special request of the Minister of Health in accordance with Circular 548, dated 10th December, 1925.

Legislation Introduced 1921-1925, inclusive.

SHOPS EARLY CLOSING ACT, 1920.

Transferred from Police to Local Authority.

SALE OF FOOD ORDER, 1921 (Parts 3, 4, 5, Imported Meat Jam and Fats).

SLAUGHTER HOUSE BYE-LAWS, 1921.

BUTCHERS' CLOSING ORDER, 1922.

MILK AND DAIRIES AMENDMENT ACT, 1922.

MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

PUBLIC HEALTH (MEAT) REGULATIONS, 1924.

TUBERCULOSIS ORDER, 1925.

WEST HAM CORPORATION BILL, 1925.

Shops Acts.

The Shops Acts are carried out under the supervision of the Medical Officer of Health, and the following table shows the work performed in connection therewith:—

List of Shops Visited during the year 1925.

	Visited.	No half-holiday form exhibited.	Warned Verbally	Warning Notice sent.	Refused to serve.	Summonses attended.
Bakers	99	11	17	2	21	..
Boot-repairers, etc.	98	7	19	11	15	..
Butchers	167	28	20	4	36	..
Caterers	103	11	5	..	..	..
Carpets and Rugs	33	..	..	..	..	..
Chemists and Druggists	72	6	5	..	..	..
China and Glassware	61	1	5	4	7	..
Clothiers	79	5	3	..	7	..
Confectionery and Tobacco	892	36	201	113	168	78
Corn Merchants.. .. .	48	3	2	..	..	..
Cycle Dealers	47	3	2	2	2	..
Drapers, Milliners and Mantle Dealers	289	38	26	20	39	1
Fishmongers	62	10	5	..	..	..
Fruiters and Greengrocers	263	12	40	19	30	7
Furniture Dealers	50	2	1	2	..	..
Furriers	22	..	..	..	..	..
Grocers and General	710	61	103	65	135	10
Hairdressers and Barbers	106	11	8	1	2	..
Hosiers and Hatters	102	1	4	3	4	1
Ironmongers	53	1	1	..	..	..
Leather and Grindery	57	2	1	3	..	..
Mixed	238	12	27	6	64	..
Music	49	1	1	5	1	1
Picture Frames	30	..	..	..	..	..
Public Houses	189	62	41	7	53	..
Tailors	67	5	1	3	2	..
Toy and Fancy Goods	80	5	7	3	14	..
Watchmakers, Jewellers & Pawnbrokers	48	2	..	2	1	..
Wireless	33	2	..	3	4	..
Totals	4.147	338	545	278	605	98

List of Adoptive Acts, Bye-Laws and Local Regulations relating to Public Health in force in West Ham.

The Public Health Acts Amendment Act, 1907—

Sections 16, 20, 22, 29, 33. Part II.

Sections 38, 50. Part III.

Sections 53, 62, 63, 64. Part IV.

Section 81 (part of). Part VII.

Section 95. Part X.

Adopted 10th April, 1909.

BYE-LAWS.

Good Rule and Government (Tent Dwellers, Squatters, etc.).

Adopted 22nd October, 1889.

*Removal of House Refuse. Adopted 28th December, 1892.

Common Lodging Houses. Adopted 26th July, 1892.

Knackers' Yards. Adopted 28th December, 1892.

Offensive Trades. Adopted 1st November, 1892.

Nuisances. Adopted 1st November, 1892.

Houses Let in Lodgings. Adopted 1st November, 1892.

Slaughter Houses. Adopted 1st April, 1921.

Nuisances in connection with the removal of offensive or noxious matter. Adopted 22nd August, 1907.

* Transferred to Borough Engineers' Department, 1st June, 1925.

LOCAL REGULATIONS.

Dairies, Cowsheds and Milkshops Orders, 1885 and 1886.

Adopted 1st August, 1888.

These Bye-Laws and Regulations are enforced, where necessary, by the Public Health Committee, acting through their Medical Officer of Health.

Propaganda.

Propaganda work has been very actively carried on during 1925. Following a Public Health Christmas Card issued in 1924, at Easter all the schools were sent a placard entitled "Holiday Hints," on which were printed some hints in respect to the best way to spend the time during a holiday (*e.g.*, spend your holiday in the open air, do not play in the streets, but go to one of the Parks or open spaces, etc., etc.).

In the early summer, when a spell of very hot weather occurred, the following leaflet was distributed from all Infant Welfare Centres, and it was exhibited on large posters on all the hoardings :—

HOT WEATHER AND INFANT MORTALITY.

Hot dry weather has a very marked influence upon the prevalence of diarrhœa in infants and young children.

Infant Diarrhœa is a serious complaint which often ends fatally unless treated early.

The *cause* is due to contamination of food (*chiefly milk*), feeding bottles, dummies, etc., by dust and germs.

This disease can be *prevented* by cleanliness and fresh air.

Use only dried milk or clean pure liquid milk and cover the top of the milk jug and sugar basin with muslin.

Feeding bottles, bottle brushes, etc., must be boiled each day and kept in a clean place.

Protect All Food from contamination and buy only from Vendors who endeavour to do the same.

House Flies carry the Germs of diarrhœa, so protect all food from them and *kill* as many as you can.

The child should have plenty of fresh air and be fed *regularly*.

At the first *onset* of diarrhœa or sickness, take the child to your doctor or the nearest Infant Welfare Clinic.

F. GARLAND COLLINS,
Medical Officer of Health.

ADDRESSES OF INFANT WELFARE CENTRES IN WEST HAM :

Plaistow Maternity Charity, Howards Road, Plaistow.

South West Ham Health Society, 81 Barking Road.

Women's League of Service, Welfare Road, Stratford.

Trinity Mission, Oxford Road, Stratford.

Given-Wilson's Institute, Pelly Road, Plaistow.

Maternity Centre, St. Luke's Square, Tidal Basin.

Plaistow Maternity Centre, 66 Martin Street, Stratford.

Silvertown Municipal Centre, Westwood Road, Silvertown.

Town Hall, West Ham, E.15.

A Health Week was observed from October 4th to 10th, and was organized in co-operation with the West Ham Insurance Committee. A series of lectures on Health matters were delivered at various halls in different parts of the Borough. Illuminated signs were posted in different places, and Health Hints were displayed on the screen at the Cinemas (by the kind co-operation of the Proprietors). In most of the Churches and Chapels the Clergy gave a sermon upon "Health." The Local Hospitals and Medical Practitioners also co-operated. Many thousand copies of the following pamphlet, entitled "How to be Healthy," were distributed:—

(Title Page).

County Borough of West Ham.



HEALTH WEEK, OCTOBER 4TH TO 10TH.

HOW TO BE HEALTHY,

BY

F. GARLAND COLLINS, M.R.C.S. (Eng.), L.R.C.P. (Lon.), D.P.H.,

Medical Officer of Health

AND

Chief School Medical Officer.

TOWN HALL,

WEST HAM.

October, 1925.

(Inside).

FOREWORD.

In presenting this pamphlet to the Public, it seems desirable to explain that though the information contained therein is necessarily of a very fragmentary nature, it is issued in the hope that it will help to strengthen the general health of the populace so as better to resist the effects of those conditions which militate against the Public Health. These conditions are being dealt with by the Town Council: but whatever the circumstances, it is essential that every citizen shall maintain as far as possible a high standard of personal health.

F.G.C.

HOW TO BE HEALTHY.

FOOD.

- (1) *Eat plain wholesome food at regular intervals and drink plenty of water.*

By plain wholesome food is meant that food which is not made up, re-cooked, highly flavoured, or spiced; but which is pure and unadulterated. There is no hard-and-fast rule as to exactly what each person should eat. That "one man's food is another man's poison" is, to some extent true. Unfortunately at the present time there is a large quantity of food exposed for sale which is "everyone's poison."

Milk is the only food that should be taken by infants up to nine months old. Such milk should, if possible, be the milk of a healthy mother. If, for various reasons, the child has to be fed artificially, it should be given either fresh, pure liquid milk or good dried milk (diluted). It is extremely difficult to procure pure cow's milk in any large town. Purchasers should, however, refuse to buy, for any purpose, milk which has been produced or which is being sold under unhygienic conditions.

The diet of a child from the age of nine months should be *gradually* altered so as to include food of a semi-solid and then solid nature. Very young children should not be given too much starchy matter (*e.g.*, potatoes) or sweets. These need not be withheld altogether, but should be given in moderation. Fruit juice, fish, boiled or stewed (not fried), eggs and meat in moderate quantities are all very desirable, whilst some form of green vegetable is essential.

Water should be drunk between, not with, meals, and school children particularly should drink at least three glasses of water each day.

Food should not be taken within one hour of going to bed, particularly by children of school age. It is of the utmost importance that meals be taken at regular intervals, and at the same time each day. It is wrong to eat between meals. All foods should be fresh, free from preservatives or dirt, and if cooked, properly cooked.

KEEP ALL FOOD PROTECTED FROM FLIES, WHICH CONVEY
GERMS AND INFECTION.

- (2) *Keep the teeth sound and clean and the feet warm and dry.*

Teeth must be cleaned every night and every morning. If decay begins the dentist should be visited without delay. Bad teeth contaminate good food, and contaminated food contaminates the whole body.

The feet should always be kept dry and warm in order to avoid catarrh, chills and other ailments.

AIR AND LIGHT.

- (3) *Breathe through the nose, not through the mouth.*

The nose acts as a filter for all air entering the lungs; it also warms the air to the correct temperature. Therefore always breathe through the nose.

Air which has once been breathed into the lungs is no longer pure, and the oftener the same air is breathed in and out of the lungs the more poisonous it becomes. That is why anyone dies of suffocation if confined in a sufficiently small space. If one is in a room with the door and window shut one must breathe impure air into the lungs: this air, although perhaps not poisonous enough to cause suffocation, is harmful enough to cause disease and ill-health. Therefore, always keep the windows open. An open window lets out more disease than it could ever let in.

- (4) *Take daily open-air exercise, in the sunshine when possible.*

Exercise is essential to health and growth, and should be regular, but adjusted according to the physical condition. Out-door exercise is, of course, the best.

The greatest of all germ killers is sunlight. A very large number of illnesses are caused by germs which are really extremely minute living organisms. They thrive and multiply in waste, rubbish, dust and dirt and in dark and gloomy places. On the otherhand germs are killed by certain disinfectants and by *light*. One of the most difficult of germs to kill is the germ of tuberculosis, but even that is destroyed if exposed to direct sunlight for 15 minutes.

Therefore every effort should be made to secure all the light and sunshine possible both in houses and elsewhere.

SLEEP AND REGULAR HABITS.

- (5) *Go to bed early to get sufficient sleep, and be regular in your habits.*

Sleep is nature's medicine for all ailments. Sleep, however, can be of various degrees, *e.g.*, restless, fitful, deep, etc., dependent upon the mental and physical condition of the sleeper, and also upon the circumstances under which he is sleeping. Children from 5 to 14 years of age need to sleep about 10 hours out of every 24 hours. Children under 5 years of age need at least 12 hours sleep per day. The best rest is obtained during the early hours of the night. Retire to rest at the same hour each night.

Regularity in all habits, personal and otherwise, is of vital importance in the maintenance of good health.

CLEANLINESS.

- (6) *Wash the whole body at least once a week.*

The human skin is covered with thousands of tiny openings called pores, which help the lungs and the kidneys to keep the body healthy. If the pores become choked up, as they do if the skin is not regularly washed, the whole system suffers in some way. Therefore be sure to wash the *whole* body weekly and the face and hands several times a day. The pores of the face and hands being generally entirely exposed, are constantly being shut up with dust and dirt. The hands, moreover, are often the means by which germs are conveyed into the mouth.

Burn all the rubbish and waste you can and place the rest into a covered receptacle.

CLOTHING.

(7) To over-clothe the body is as prejudicial to health as to under-clothe it. Children, especially, should throughout all the year wear a wool or flannel garment next to the skin. The garments worn next to the skin require washing at least weekly, and any garment in use during the day should not be worn at night.

CONCLUSION.

(8) Finally, it must be borne in mind that good health cannot be purchased, neither can it be obtained or retained simply by making use of the exceptionally well-equipped medical facilities provided by the State and Local Authority.

It is only by careful attention to the ordinary laws of nature, and by in all respects so modelling the mode of life and thought, as to place health as a matter of prime importance, that one of the greatest assets vouchsafed to humanity, viz.: Good Health, can be secured for the individual and for the community.

Every person should strive to be healthy, remembering that "Health is better than Wealth."

During Rat week—November 2nd to 9th—Posters were exhibited and Leaflets distributed to all factories and business premises pointing out the damage done by rats, their danger and the various means of rat destruction. It was also made plain that it is the duty of each individual citizen to keep their premises free from rats and mice.

At Christmas, 1925, the following Christmas Card was issued through the School Teachers to every school child:—

(Title Page).

THE PUBLIC HEALTH COMMITTEE of the West Ham Council send Greetings for a Happy Xmas and Good Health during the Coming Year.

(Inside).

HEALTH IS BETTER THAN WEALTH.

THIS CHILD EATS :—

Wholemeal Bread.
 Butter and Dripping.
 Fresh Fish.
 Good Meat.
 Green Vegetables.
 Suet Pudding.
 Eggs.
 Fruit.

HE DRINKS :—

Pure Milk.
 Cocoa.
 Water.

HE WEARS :—

Woollen Under-
 garments.



HE EXERCISES :—

In the open-air.

THIS CHILD EATS :—



White Bread.
 Margarine and Jam.
 Dried Fish.
 Tinned Food.
 Dried Peas and Beans.
 Pastry.
 Sweets.

HE DRINKS :—

Infected Milk.
 Tea.
 Coffee.

HE WEARS :—

Cotton Under-
 garments.

HE EXERCISES :—

Very little or not at all.

An Epidemic of Measles, which was general all over the Country, became most severe during the month of December. With the consent of the Public Health Committee leaflets were issued and widely distributed, pointing out the dangers and premonitory signs of measles, and the following poster was printed in large type and exhibited on all hoardings:—

MEASLES.

Measles is dangerous and very infectious: immediate treatment is most essential.

There is at present a severe epidemic of this disease,

CAUSING THE DEATH OF A NUMBER OF WEST HAM
CHILDREN EACH WEEK.

The first sign of Measles is a Feverish Cold, with sneezing and running from the eyes and nose. The Rash first appears on the fourth day.

The *Dangerous Stage* of Measles is *during convalescence*. It is then that *complications* develop which are liable to *prove fatal*. Take the *utmost care during the second week* of illness, and do not allow the child out of doors under at least ten days from the onset of the *rash*. *Don't forget* the younger the child the greater the danger.

F. GARLAND COLLINS,
Medical Officer of Health."

Town Hall, West Ham, E.15.

I am convinced that much good is done by such methods of propaganda as set out above, and have proof from the reports of Health Visitors, Sanitary Inspectors, School Nurses and others, that much of the information given is being acted upon by an increasing number of people. In this connection my sincere thanks are due to the local press for the invaluable co-operation which they have extended to this Department in giving prominence in the Press to health matters.

With the increasing amount of propaganda being pursued, there is, in my opinion, urgent need for closer co-operation between the various Societies and Authorities concerned in order to prevent overlapping and undue prominence being given to one or other particular phase.

Professional Nursing in the Home.

There is no municipal arrangement for professional nursing in the homes. There are, however, several voluntary Associations employing a large staff of efficient nurses who carry out invaluable work in nursing the necessitous in their homes. As mentioned elsewhere, the co-operation between these Societies and the Local Authority is of the closest possible nature, both in respect to home nursing and health visiting. The Forest Gate section of this Borough is supplied with home-nurses by the Essex County Nursing Association from their branch in Beechcroft Road, Leytonstone.. The Silvertown area is similarly supplied through the Tate Nurses (Queen's Nurses), Nurses Home, Saville Road, Silvertown. By far the largest amount of nursing in the homes, however, is carried out by the Plaistow Maternity Charity, who serve all local areas.

Co-Operation.

The matter set out in the various sections of this report is sufficient to indicate that there is close and friendly co-operation between this department and the ancillary Health Services (both private and public) in the Borough, and this remark applies also to many Hospitals and other medical organizations outside the Borough; nor is this co-operation confined to direct Health organizations. There is, however, one weak link in the chain, viz., that though the co-operation between H.M. Inspector of Factories and the Medical Officer of Health is complete, there is a regrettable lack of any co-operation between this department and the Factory Medical Service (which is supervised by the Home Office and not by the Ministry of Health). This lack of co-operation on the part of the Factory Medical Service extends likewise to the School Medical Service, and is all the more regrettable seeing that there are so many Factories in the Borough which employ a very large number of young persons (particularly girls) almost as soon as they leave school.

Particulars of Bodies received into the Mortuaries during 1925.

MONTH.	STRATFORD MORTUARY.								CANNING TOWN MORTUARY.							
	Number received.	Over 5 yrs.	Under 5 yrs.	Sent in by Coroner.	Sent in by Police.	Sent in on Sanitary grounds.	Number of Post-mortems.	Number of Inquests.	Number received.	Over 5 yrs.	Under 5 yrs.	Sent in by Coroner.	Sent in by Police.	Sent in on Sanitary grounds.	Number of Post-mortems.	Number of Inquests.
January ..	24	17	7	24	..	..	18	24	2	1	1	..	1	1	1	1
February ..	19	13	6	18	1	..	15	19	3	2	1	..	3	..	2	3
March ..	12	9	3	12	..	..	8	12	3	3	..	..	3	..	3	3
April ..	18	15	3	18	..	..	14	18	5	5	..	..	5	..	4	5
May ..	14	10	4	14	..	..	9	14	2	2	..	..	1	1	1	1
June ..	18	13	5	18	..	..	11	18	2	2	..	..	2	..	1	2
July ..	16	13	3	14	2	..	11	16	4	3	1	..	3	1	2	3
August ..	15	12	3	15	..	..	13	15	2	2	..	..	2	..	1	2
September ..	21	17	4	19	2	..	17	21	2	2	..	..	2	..	1	2
October ..	14	12	2	11	3	..	10	14	4	4	..	..	4	..	4	4
November ..	16	8	8	14	2	..	12	16	4	4	..	..	4	..	4	4
December ..	18	13	5	18	..	..	7	18	2	2	..	..	2	..	2	2
Total ..	205	152	53	195	10	..	145	205	35	32	3	..	32	3	26	32

West Ham Mortuary was not in use during 1925.

The above Inquests were dealt with at Stratford.

Number of days bodies remained in Mortuaries during 1925:—

47 were 1 day in Stratford Mortuary.

131	„	2	days	„	„	„
15	„	3	„	„	„	„
9	„	4	„	„	„	„
3	„	5	„	„	„	„

5 were 1 day in Canning Town Mortuary.

10	„	2	days	„	„	„
17	„	3	„	„	„	„
3	„	4	„	„	„	„

1 Doctor performed 13 post-mortem Examinations.

1	„	„	12	„	„
1	„	„	11	„	„
1	„	„	9	„	„
3	Doctors	„	6	„	„ each.
3	„	„	5	„	„ „
4	„	„	4	„	„ „
6	„	„	3	„	„ „
16	„	„	2	„	„ „
27	„	„	1	„	„ „

Sanitary Circumstances of the Area.

WATER.

Several large factories have private wells for drawing water from the chalk, but practically the whole of the Borough is supplied with water by the Metropolitan Water Board. The supply is constant, and in every case it is conveyed directly to the house. A few houses have storage tanks in the roof which need periodical cleansing.

RIVERS AND STREAMS.

The ditches are under the control of the Town Council as successors to the Dagenham Commissioners, as also are the river banks for the prevention of floods. The Lea and the

Thames, both tidal rivers, are under the control of the Port of London Authority as regards the Thames and part of the River Lea. The rest of the Lea and its backwaters are under the Lea Conservancy.

There are two main sources of pollution into the river before it enters West Ham at Temple Mills, viz., from the sewage effluents of two neighbouring Authorities. These enter this area at Temple Mills Railway Sidings and discharge into the Water Works River (a tributary of the Lea).

Under the London County Council (General Powers) Act, 1925, both these Authorities now have powers to discharge into the L.C.C. Sewer at Hackney. In respect to one of these Authorities plans have been prepared, and the work should be in hand shortly. If and when both the above-mentioned effluents cease to enter the Lea, the river will be improved as regards pollution, but will still be subject to storm waters which are, so far, inevitable.

A further contingency may develop should the **two effluents** previously mentioned be cut off, for during the summer months, with extreme heat and little tide running, the river beds may run dry owing to the whole of the Lea water being taken up by the Metropolitan Water Board with the exception of just sufficient to allow for the navigation of the Lea Cut from Lea Bridge to Old Ford.

DRAINAGE AND SEWERAGE.

The water carriage system of sewage removal is almost universal throughout the whole area. With few exceptions all houses are provided with properly flushed modern water-closets, discharging through appropriate drains into Public Sewers, which also convey the surface water and most of the rainfall. A certain portion of the Borough, being isolated by the Victoria and Albert Docks, is drained into a main sewer running from west to east through a narrow strip of the southern portion of the Borough of East Ham, whence it discharges into the London County Council Sewer at North Woolwich.

The North-Western corner of the Borough—an area of, roughly, 120 acres containing two terraces of houses and some isolated buildings remains unsewered, but is drained into a

series of cesspools. A scheme is now in hand whereby the sewage of this area will be dealt with by the installation of suitable filter beds.

The Sewers draining the main portion of the district (five-sixths of the whole area) converge by means of specially constructed intercepting Sewers to the Corporation Pumping Station, situated near the middle of the Western border of the Borough. Here the sewerage is pumped into the London Northern Outfall Sewer which crosses the Borough obliquely, whence it gravitates to the London Outfall at Barking.

Disposal of House Refuse.

During the years 1921 to 1924, inclusive, house refuse to the number of loads as indicated below, was collected and disposed of by this Department:—

1921	...	...	...	...	34,157 loads.
1922	...	...	...	...	35,716 „
1923	...	...	...	...	37,192 „
1924	...	...	...	...	38,677 „

The house refuse is at present collected by horse-drawn vehicles, and is disposed of in two different ways.

The refuse from the Northern section of the Borough is carted to a big refuse dump at Temple Mills, which is well isolated and suited for the purpose. This site is rented from Messrs. Abbotts. Some other method of refuse disposal should occupy the attention of the Council in due course, as the site in question will not be available for a much longer period.

The refuse from the Southern part of the Borough is carted to a wharf at Quadrant Street and, under contract, taken by barges down the river Thames to be disposed of.

In the early part of the year the Public Health Committee had under consideration a more modern method of dust collection, and came to the conclusion that the system known as the "Pagefield System" (collection by combined horse traction and motor lorry) was a suitable one to adopt. In order, however, that the collection of house refuse might be more closely correlated with the cleansing of the streets and highways, the

responsibility for dust collection was transferred from the Public Health Department to the Borough Engineer's Department.

It is probable that this combined system will soon be in actual working.

By the West Ham Corporation Act, 1888, the Corporation is empowered to require owners of houses to provide movable receptacles for house refuse instead of ashpits, and by special Bye-Law the occupiers of houses are required to place them outside their houses on such days as the Council fix. Under these provisions the house refuse is collected twice each week by the Council's own vehicles.

Abatement of Nuisances.

The following table shows the number of Inspections and Sanitary Notices served in respect of, in the sixteen Wards of the Borough during the year 1925:—

Ward.	Inspections.	Notices served in respect of	
New Town	775	...	606
Forest Gate	504	...	353
High Street	1055	...	836
Broadway	716	...	423
Park	333	...	221
Upton	440	...	306
West Ham	603	...	411
Plashet Road	313	...	201
Plaistow	790	...	644
Canning Town and Grange.....	1105	...	893
Ordnance	711	...	550
Hudsons	590	...	372
Bemersyde	306	...	205
Tidal Basin	972	...	775
Beckton Road	946	...	760
Custom House & Silvertown...	979	...	634
Totals	11,138		8,190

Summary of Work of Sanitary Inspectors during 1925.

No. of Complaints Received and Investigated..... 5,340

No. of Inspections—

Dwelling Houses	11,358
Newly-infected Houses	9,930
Common Lodging Houses	82
Slaughter-houses	3,282
Bakehouses	292
Dairies	124
Cowsheds	43
Milkshops	118
Retail Shops (<i>e.g.</i> , Eel-pie Shops, Ice Cream Shops, etc.)	3,514
Schools	1
Canal Boats	—
Offensive Trades	238
Factories (including Food Factories)	692
Workshops	283
Laundries	14
Miscellaneous (<i>e.g.</i> , Smoke Abatement, Offensive Accumulations, Stables, etc.)	3,749
Re-inspections	42,349

Number of Notices served—

On Offender	10
On Owner	*8,314
On Occupier	237

Number of Notices complied with—

By Offender	2
By Owner	*8,338
By Occupier	184

Total Nuisances found 46,508

Total Nuisances abated 45,787

*Apparent discrepancies caused by a large number of notices not being complied with at the end of previous year. There would normally be about 1,000 notices not fully complied with at any date during the year, rather more in winter than in summer.

Defects for the abatement of which Notices were served during the year 1925.

Drains and Soil Pipes—		Flushing Apparatus—	
Cleansed	139	Repaired	628
Repaired	846	New provided	94
New Provided	3	Water Supply provided ..	32
W.C. Pans or Traps—		Yard Paving—	
Cleansed	42	Repaired	1300
Repaired	127	New provided	1
New provided	318	Defects remedied in—	
Surface Gullies—		Roofs	4210
Repaired	19	Floors	1373
New provided	1	Staircases	536
Sinks and Sink-Pipes—		Windows	2030
Cleansed	8	Doors	677
Repaired	447	Fireplaces	1552
New provided	41	Walls and Ceilings	14551
Stack-Pipes and Rain-		Animals improperly kept	27
Water Gutters—		Offensive Accumulations	126
Repaired	1994	Over-crowding	28
New provided	20	Smoke Nuisance.....	175
Water Fittings & Cisterns—		Gipsies removed	6
Cleansed	4	Dust receptacles provided	1291
Repaired	338	Rooms disinfected	2711
New provided	1	Premises infested with	
		Rats	2

It frequently happens that a single sanitary notice specifies many defects needing abatement.

Smoke Abatement.

Chimneys are at all times under general observation, special detailed observations being made at intervals, or when complaints are received. Responsible persons are interviewed, and letters of warning sent, or notices served when occasions for such action arise. The smoke rising from Railway Engines at a large Railway Centre in the Borough is very appreciable. The same may be said in respect to ships in the Docks when stoking is in progress.

The number of warnings and notices issued during the year was 175.

Readings of atmospheric impurity are not taken.

Common Lodging Houses.

There are 11 Common Lodging Houses in the Borough, four in the North of the Borough and seven in the Southern portion, all of which, with one exception, were originally constructed and used for other purposes such as private dwellings or warehouses, and have been adapted more or less successfully to meet the requirements of the Common Lodging House Bye-Laws. The accommodation in these houses amounts to 636 beds.

These Lodging Houses receive frequent visits from the Sanitary Inspectors.

There are some houses let as tenements which are often a source of anxiety, as they are not subject to Bye-Laws similar to a Common Lodging, and it is manifestly impracticable at present to put into force in this area Section 6 of the Housing Act, 1925.

Offensive Trades.

There are 29 premises where statutory offensive businesses are carried on in the Borough. They include: Fat Melters and Bone Boilers 21; Soap Boilers, 2; Fish Skin Dressers, 1; Gut Scrapers, 1; Chemical Manure Manufacturers, 1; Fish Waste Collectors and Fish Meal Manufacturers, 1; Degreasing Bones and Glue Making Contractors, 1; Tripe Dressers, 1.

These are subject to constant inspection, and may be said to be carried on with as little nuisance or inconvenience to the general public as practicable.

As a result of notices served and letters sent the following improvements have been carried out at offensive trades factories:—Messrs. Edward Cook and Co., Ltd., Soap Makers, Cook's Road, have installed an entirely new process for dealing with the fumes emanating from the fat melting appliances, consisting of a separate 6in. iron pipe from each pan carried to a sprinkler condenser; after leaving the condenser the fumes are conveyed by means of a large pipe to the main boiler flue, the temperature of which is usually about 350 degrees Far.

Thos. Harris and Sons, Ltd., Soap Makers, Marshgate Lane, have installed Meldrum furnaces to each boiler (automatically stoked). At the entrance to the main flue there is also

a large forced draught fan. From many observations taken since this installation I am convinced that there is a marked diminution of emissions of smoke.

The Smithfield Animal Products Co., Ltd., Marshgate Lane, have recently installed Johnson's Patent Smoke Consumer to their boiler furnace, and claim that it has been working satisfactorily.

During the year 1925, application was received from Messrs. Turner and Sampson, to establish Fat Melting at premises in Beckton Road, Canning Town. This license was granted subject to the satisfaction of the Medical Officer of Health as to suitable storage, apparatus, and machinery to be used; and the approval of the Borough Engineer as to plans for a proposed extension of building.

An application was also received from Messrs. Geo. Johnson and Son to establish Fat Melting and Bone Boiling at the works of the Anglo-Continental Guano Works, and Gibbs' Fertilizers, North Woolwich Road. This license was granted subject to the storage apparatus and machinery being to the satisfaction of the Medical Officer of Health, and also that the license held by them in respect of 101 Carpenters Road, E.15, be surrendered, and the license held by Messrs. Gibbs' Fertilizers in respect of North Woolwich Road, also be surrendered.

Bye-Laws are in force in respect to the time and manner of conveyance of offensive material through the streets, and several summonses have been issued upon offenders and heavy penalties imposed in this connection.

With the modern facilities for transport and power it is difficult to find any laudable reason why offensive trades should be established and carried on in the very midst of thickly populated districts.

Schools.

The Public Elementary Schools consist of 46 Council Schools and 14 Non-Provided Schools, together with five Council Special Schools, and two Higher Elementary Schools, affording in the aggregate accommodation for 70,090 scholars.

The School Medical Service is administered by the Chief School Medical Officer (who is also the Medical Officer of Health) with a whole-time staff of 9 Medical Officers, 3 Dental Surgeons, 23 Nurses and 9 Clerks.

The Schools are for the most part modern, substantially built buildings adequately supplied with water and provided with sufficient surrounding air space, while their general cleanliness appears to be well looked after. Cloak-room accommodation is very limited in some Schools, and more efficient heating is desirable.

With a view to checking the spread of epidemic disease it has been the practice for many years past for the Medical Officer of Health on receiving information of the occurrence of infectious disease in the family of a scholar to send a red-coloured Notice to the Head Teacher of the School attended (Day School and Sunday School) recommending the exclusion of children coming from the infected home. The Red Notice is subsequently followed by a White Notice freeing the family from quarantine on the completion of the necessary isolation and the official disinfection of the premises. Each school is provided with a supply of disinfectants for general or special use by the Education Authority.

Chiefly for its moral effect fifty-eight Schools (Infants' Departments) were disinfected during the Christmas Vacation, 1925, in consequence of the increase in the number of cases of Measles. It was not found necessary to order the closure of any School, or part of a School, on account of infectious disease, or for any other reason.

During 1925 a residential Open Air School to accommodate 80 boys was opened at Fyfield, near Ongar, Essex. The benefit derived by the children who have been fortunate enough to be sent to this School has been really remarkable. The School, ~~which~~ has now been open for over a year, and not a single case of infectious disease or serious illness of any kind has occurred. I am of opinion that such a School is one of the most valuable assets in the Institutional treatment of children.

A Day Open Air School, to accommodate 60 girls, has been opened within the Borough at Crosby Road. Only one case of infectious disease (Diphtheria) has occurred during the year. The Head Mistress of the School writes in her Report: "Almost without exception the children are happier, more alert and at the same time more composed and under better self-control. Their appetites are steadier and less fussy. Work, play, meals and rest are all enjoyed."

The girls who have attended this School have all gained in weight, and their general health has improved. It is a great example of the efficacy of open air in dealing with delicate children.

Housing.

A large shortage of houses still exists. The reason for this would seem to be cessation, or curtailing, of building since the War.

No houses have been erected by the West Ham Council during the year 1925, but 42 were erected by private enterprise. A housing scheme for the proposed erection of 152 (four-storey) tenement flats is now before the Ministry of Health for consideration. The great lack of building space seriously hampers the Council in their proposals as to the extent and nature of their housing scheme.

From 1921 to 1925, inclusive, 249 houses have been erected either by Municipal Housing Scheme, or by private enterprise, and the population during that time has increased to the extent of approximately 16,140, this showing one house erected for about every 65 persons. In 1921 there were 6.26 persons per inhabited house, and in 1925 6.55 persons per inhabited house.

The standard of housing of the area varies considerably. A certain amount of property is in such a bad state of disrepair that normally a closing order would be issued in respect to it.

There are no houses to let, and the few empty ones are only obtainable by purchase.

Requests for accommodation are received almost daily. In many cases people are in a position, and willing to pay for extra accommodation, but it is practically impossible to procure the same within the Borough.

Twenty-eight exceptionally bad cases of over-crowding were dealt with by Notice under the Public Health Act during the year 1925.

Over-crowding is very prevalent, and is one of the most urgent problems needing attention, causing, as it does, chronic ill-health and a grave menace in respect to the spread of infectious diseases. Further, its effect upon the morals of the populace is degrading. Its causes are only too well known and are not peculiar to West Ham, but to more or less all large industrial areas throughout the country.

Apart from the type of property, referred to above, which is in a perpetual state of disrepair, and where no sooner is one Sanitary Notice complied with than it becomes necessary to issue a further Notice, most of the defects are due to wear and tear, which is often of an excessive nature because of the large number of occupants, including sub-tenants. Some of the poorest class of property changes ownership at comparatively

frequent intervals. With a certain class of landlord, not until a Magistrates' Order has been obtained is the work specified on a Sanitary Notice carried out. This involves frequent re-inspections and a great amount of clerical work. 260 Summonses were issued during 1925 (see page 47).

Blocks of houses in two roads in the Southern area are subject to flooding during storm periods owing to the fact that the ground floor of these dwellings is below the level of the sewer. Several devices have been employed to obviate this, but with only partial success.

No representations have been made to the Council with regard to unhealthy areas; all action has been taken with regard to separate houses.

Van-dwellers congregate with their various shows (Hobby-horses, Cocoa-nut pitches, etc.) on several vacant plots in the Borough. Notices have, in two instances, been served upon the owners of the plots concerned to rid them of these people, but considerable difficulty has been experienced in getting the Notices complied with. In a few cases the Public Health Committee has given instructions for the vacant plot concerned to be fenced.

INCREASE OF RENT AND MORTGAGE INTEREST RESTRICTION ACT, 1920.

The total number of certificates granted by the Authority under the above Act during the year was 35.

Housing particulars during 1925 in the form desired by the Ministry of Health.

Number of New Houses erected during the year—

(a) Total—including numbers given separately under	
(b)	42
(b) With State assistance under the Housing Acts—	
(i.) By Local Authority	Nil
(ii.) By other bodies or persons	Nil

1. UNFIT DWELLING HOUSES: INSPECTION—

(1) Total number of Dwelling Houses inspected for housing defects (under Public Health or Housing Acts	11,358
--	-----	-----	-----	-----	-----	--------

- | | |
|---|-------|
| (2) Number of Dwelling Houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925 | 8,688 |
| (3) Number of Dwelling Houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation | Nil |
| (4) Number of Dwelling Houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation | 8,561 |

2. REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICE—

Number of defective Dwelling Houses rendered fit in consequence of informal action by the Local Authority or their Officers.

A certain number of defective Dwelling Houses are rendered fit as a result of interviews between Officials and Builders.

3. ACTION UNDER STATUTORY POWERS—

A. Proceedings under Section 3 of the Housing Act, 1925—

- (1) Number of Dwelling Houses in respect of which notices were served requiring repairs.

All notices dealt with under Public Health Acts and West Ham Corporation Acts.

- (2) Number of Dwelling Houses which were rendered fit after service of formal notices—

- | | | |
|---|--------|-----|
| (a) By Owners | ... .. | Nil |
| (b) By Local Authority in default of Owners | ... .. | Nil |

- (3) Number of Dwelling Houses in respect of which closing Orders became operative in pursuance of declarations by Owners of intention to close Nil

B. PROCEEDINGS UNDER PUBLIC HEALTH ACTS—

(1) Number of Dwelling Houses in respect of which notices were served requiring defects to be remedied	8,561
(2) Number of Dwelling Houses in which defects were remedied after service of formal notices—	
(a) By Owners	8,524
(b) By Local Authority in default of Owners	Nil

C. PROCEEDINGS UNDER SECTIONS 11, 14, 15 OF THE HOUSING ACT, 1925—

(1)	} Nil.
(2)	
(3)	
(4)	
(5)	

Prosecutions, 1925.

Nuisances (Public Health Act) —	
260 Summonses.	174 Summonses withdrawn.
Failure to comply with Magistrate's Orders—	
14 Summonses.	8 Summonses withdrawn.
Adulterated Milk—	
2 Summonses.	
Refusal to sell Milk to Officer—	
1 Summons.	
Carrying on Trade as Dairyman or Purveyor of Milk without consent—	
1 Summons.	
Selling Baking Powder useless as such—	
1 Summons.	1 Summons dismissed on payment of £1 1s. 0d. costs.
West Ham Corporation Acts, 1893 and 1898—	
8 Summonses.	8 Summonses withdrawn.
Removal of offensive matter during prohibited hours—	
2 Summonses.	

Removal of offensive matter in a vehicle not properly covered
or constructed for the purpose—

2 Summonses.

West Ham Grocers, etc., Half Holiday Order, 1921—

2 Summonses.

West Ham Grocers, etc., Closing Order, 1919—

6 Summonses.

Shops Early Closing Act, 1920—

90 Summonses. 2 Summonses dismissed.

The above number of Summonses issued total	389
The total number for the 5 years 1921-1925 =	2316
The total number for the previous 5 years, 1916-20 = ...	819
The total number for the 5 years previous to the Great War, 1911-1915 =	498

**Table showing the different Trades in which the
Outworkers were engaged during 1925.**

Tailoring	214
. Making of Shirts	187
,, ,, Underclothing	33
,, ,, Blouses	32
,, ,, Ties	28
,, ,, Boxes	27
,, ,, Umbrellas	26
,, ,, Millinery	24
,, ,, Dresses	17
,, ,, Brushes	16
,, ,, Dressing Gowns	12
,, ,, Knitted Goods	13
,, ,, Upholstery	11
,, ,, Bon-bons	11
,, ,, Artificial Flowers	10
,, ,, Lamp Shades	6
,, ,, Shoes	6
,, ,, Tennis Balls	6
,, ,, Furs	5
,, ,, Waterproofs	5
,, ,, Flags	5
,, ,, Hand-bags	4
	<hr/>
	698
	<hr/>

Outworkers' List. Section 107.

Nature of Work.	Outworkers' List. Section 107.								Notices served on Occupiers as to keeping or sending Lists.
	Lists received from Employers.						Number of Outworkers' Ad- dresses received from other Councils	Number of Outworkers' Ad- dresses forwarded to other Councils.	
	Twice in year.			Once in year.					
	Lists.	Outworkers.		Lists.	Outworkers.				
		Contractors.	Workmen.		Contractors.	Workmen.			
Wearing Apparel— (1) Making, etc. (2) Cleansing & Washing Lace, Lace Curtains and Nets .. Furniture and Up- holstery.. Fur Pulling .. Umbrellas, etc. .. Paper Bags & Boxes Brush Making .. Stuffed Toys .. Tennis Balls .. Tile Making .. Electro Plate .. Cables and Chains Locks, Latches and Keys Totals ..	78 2 80	86 86	366 4 370	4 1 5 4	13 4 17	653 653	347 347	104 104

Number of Outworkers notified to West Ham from the undermentioned Districts.

City of London	234
Poplar	105
East Ham	63
Stepney	53
Leyton	49
Finsbury	54
Shoreditch	21
Westminster	15
Hackney	13
Marylebone	5
Islington	3
Hertford	2
Tottenham	2
Woolwich	1
Walthamstow	1
Kensington	1
Hendon	1

Number of Outworkers working for West Ham firms notified to the undermentioned Districts.

Stepney	168
Leyton	80
East Ham	58
Poplar	20
Bethnal Green	8
Walthamstow	4
Hackney	3
Westminster	2
Ilford	2
Barking	2

1.—Inspection of Factories, Workshops and Workplaces.

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS OR INSPECTORS OF NUISANCES.

Premises. (1)	Number of		
	Inspections. (2)	Written Notices (3)	Occupiers Prosecuted. (4)
Factories (Including Factory Laundries)	528	16	..
Workshops (Including Workshop Laundries)	111	7	..
Workplaces (Other than Outworkers' premises)	148	10	.
Total.. .. .	787	33	..

2.—Defects found in Factories, Workshops and Workplaces.

Particulars. (1)	Number of Defects.			Number of offences in respect to which Prosecutions were instituted. (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	
Nuisances under the Public Health Acts :—*				
Want of cleanliness	112	109	..	..
Want of ventilation	6	5	..	..
Overcrowding	2	2	..	..
Want of drainage of floors ..	1	1	..	..
Other nuisances	96	109	..	..
Sanitary accommodation—				
Insufficient .. ..	..	..	..	..
Unsuitable or defective ..	17	16	..	..
Not separate for sexes ..	..	..	..	..
Offences under the Factory and Workshop Acts :—				
Illegal occupation of underground bakehouse (s. 101) .. ..	..	..	..	..
Other offences	9	8	7	..
(Excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921.)				
Total	243	250	7	..

* Including those specified in sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

Outwork in Unwholesome Premises. Section 108.

Nature of Work. (1)	Instances. (2)	Notices. served. (3)	Prosecu- tions. (4)
Wearing Apparel—			
Making, etc.			
Cleaning and Washing.....			
Household linen.....			
Lace, lace curtains and nets			
Curtains and furniture hangings			
Furniture and upholstery			
Electro-plate			
File making			
Brass and brass articles			
Fur pulling			
Cables and chains			
Anchors and grapnels			
Cart gear			
Locks, latches and keys			
Umbrellas, etc.			
Artificial flowers			
Nets, other than wire nets			
Tents			
Sacks			
Racquet and tennis balls			
Paper, etc., boxes, paper bags			
Brush making			
Pea picking			
Feather sorting			
Carding, etc., of buttons, etc.			
Stuffed toys			
Basket making			
Chocolates and sweetmeats			
Cosaques, Christmas crackers, Christ- mas stockings, etc.			
Textile weaving			
Total	—	—	—

*Nil.**Premises
satisfactory.*

Inspection and Supervision of Food.

MILK SUPPLY.

On January 1st, 1925, there were 258 Milkshops and Dairies on the register, and during the year 13 new premises were registered for the sale of ordinary cows' milk, and seven premises ceased to sell it, leaving 264 premises on the books on December 31st, 1925, of which 226 sell ordinary milk and five sell milk only on the premises (restaurants), the remaining 33 sell bottled milk only. Of the 226 milk premises 101 are Dairies, or premises where milk is the chief—or one of the chief—articles for sale.

Thirty-five persons applied to be registered for the Sale of Milk, the majority of whom had taken over businesses where milk had already been sold.

Five were refused registration, as the premises were unsuitable, but in one case the applicant eventually obtained accommodation which he was able to alter to the satisfaction of the Sanitary Authority, and registration was granted.

Two other applicants who wished to share premises with another Dairyman, but were refused registration, eventually got other accommodation in another Borough.

In one case where registration was refused, the applicant defied the decision of the Council and was prosecuted and heavily fined.

One Dairyman, by the advice of the Medical Officer of Health, has removed to much better premises, which he has altered so as to bring it up to modern standards, and in another case old and undesirable premises were greatly altered and improved.

One Dairy has been closed as the premises were unsuitable, the occupant, on the advice of the Sanitary Authority, selling his round to a Dairyman.

In two cases application to be registered as a Milk Seller was made, but subsequently withdrawn.

Six Statutory Notices were served by the Inspector of the district, and the following defects remedied:—

- 1 Defective Drain.
- 1 Drain Vent Pipe.
- 2 Roofs.
- 1 Defective Stackpipe.
- 2 Defective Walls.
- 1 Defective Guttering.
- 1 Defective Water Fittings.

In six cases the dairy and yard floorings were repaired and a roof repaired and ash-pail supplied and a drain vent pipe repaired and cleansing done on four premises without a legal Notice being served; and in one case more satisfactory arrangements for the cleansing of the milk vessels have been made.

MILK AND DAIRIES (CONSOLIDATION) ACT, 1915.

Five requests were made by Purveyors to procure samples of milk in the course of transit or delivery from the seller. In three cases it was found unnecessary to comply with such requests, but in the other two cases samples were duly taken, and the milk passed the standard. In addition, two requests were made by the Medical Officers of adjoining Boroughs, and samples were taken from churns on each occasion.

MILK AND DAIRIES (AMENDMENT) ACT, 1922.

It was not deemed necessary to take any action under the above Act.

The practice of retailing “loose” milk from general shops should cease. The milk is frequently kept on the same counter with brushes, soap, firewood, oil, etc.

The present method of purveying milk in churns, and often dirty “prams,” and of running the quantity of milk into the jug on the dirty street or doorstep, is absolutely opposed to

cleanliness. No milk should be sold except in properly cleansed sealed bottles of varying capacity. In this connection it is a matter of considerable satisfaction to write that an increasing demand among the populace for bottled milk is very noticeable.

TUBERCULOUS MILK AND CATTLE.

During the year 96 samples of milk were taken, and submitted to the Bacteriologist for microscopical examination for the presence of Tubercle Bacilli, special sterile bottles being procured for this purpose. Of these samples 83 proved negative. The remaining 13 shewed the presence of Acid Fast Bacilli indistinguishable microscopically from the Tubercle Bacillus, and appropriate action was taken in each case.

No case of Tuberculous Cattle came to the notice of the Local Authority during the year.

MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

The following Licences were granted:—

One to bottle and sell and four to sell Grade "A" (Tuberculin Tested) milk obtained from Lord Rayleigh's Farms, Hatfield Peverel, and J. H. Robinson, Iford, Lewes, Sussex; five to sell Certified Milk bottled at Lord Rayleigh's Farm, Hatfield Peverel; two to bottle and sell, and three to sell Grade "A" milk purchased from Carter and Sons, of Lewes, and Lord Rayleigh's Farm, Hatfield Peverel; one to Pasteurize and sell at 106 Windmill Lane, E.15; and three to sell Pasteurized Milk.

Thirty-eight samples of milk were submitted for Bacteriological Examination, the results being as follows:—

Grade "A."		Grade "A" (Tuberculin Tested).		Pasteurized.	
Up to	Below	Up to	Below	Up to	Below
Standard.	Standard.	Standard.	Standard	Standard.	Standard.
1	5	6	5	13	8

With reference to the 5 samples of Grade "A" Milk which failed to pass the required standard, the serious attention of the Dealer was called to the unsuitability of his premises. In the case of the 5 samples of Grade "A" (Tuberculin Tested) and 8 samples of Pasteurized Milk which failed to pass the required standard, these having been supplied by the same Dealer, letters of warning were sent drawing his serious attention to the offence, and threatening drastic action by the Local Authority. At an interview between another Dealer and the Medical Officer of Health certain suggestions, particularly in respect of the method of cleansing the milk bottles, were made by the latter. These methods were put into operation with satisfactory results.

GRADED DESIGNATED MILKS.

Applications for licences to sell designated milk have been refused in several instances, chiefly owing to the fact that the premises were unsuitable, and that previous samples of milk taken from the premises proved, from bacteriological examination to be contaminated—sometimes to a marked degree.

All grades of milk have proved from time to time, on bacteriological examination, not only not to reach the standard required, but in some instances to be more contaminated than ordinary milk. It is only by the constant visiting of the premises, and by letters of warning to the dealers that "designated" milks do not fall far below the degree of impurity officially allowed.

The apparatus used for Pasteurizing is the "Tarbet Positive Holder," made by the Aluminium Plant Vessels Co.

Meat.

PUBLIC HEALTH MEAT REGULATIONS, 1924.

From the date of operation of the above Regulations the Sanitary Inspectors on their respective districts carried out all inspections during the day, but a weekly rota was formed for the night work for two Inspectors to work the whole of the

Borough. This procedure continued until the appointment of a Meat Inspector, who commenced his duties on the 23rd November, 1925, and from this date forward the Sanitary Inspectors have taken duty singly to enable the inspection to be fully carried out. No steps have been taken in connection with the marking of meat.

In the early part of 1926 a fully qualified Veterinary Surgeon was appointed to work these regulations in conjunction with the Meat Inspector.

Of the 9,148 animals inspected from the inauguration of the above regulations 487, or 5.3% were diseased.

In connection with the disposal of condemned meat, all condemned meat is dealt with at Local Factories. In the event of any meat being condemned a Certificate from the factory receiving the same is required by the Local Authority before an official Condemnation Certificate is issued.

The following forms are used in connection with the above regulations :—

Public Health (Meat) Regulations, 1924.

NOTICE OF INTENTION TO SLAUGHTER.

AtSlaughter-house.

<p>Section 10 provides that NO carcase or internal organs of any animal shall be removed from the slaughter-house until three hours have elapsed from slaughter or six hours from the giving of notice to the Local Authority.</p> <p>If the six hours expire before 7 a.m. the carcase must remain until that time.</p>	No OF	DATE.	TIME OF SLAUGHTER.
	Cattle		
	Calves		
	Lambs		
	Sheep		
	Pigs		

Signed

This notice must be delivered at the Public Health Department, Town Hall, West Ham (Telephone No. Maryland 2660) in accordance with the Regulations.

Date and time of Posting.....

Form for Voluntary Surrender
of Meat, Fish or other Articles
of Food.

COUNTY BOROUGH OF WEST HAM.

PARTICULARS OF FOODS, ETC.,
SURRENDERED.

Date.....192

Time.....

Article Examined

Where Examined

Result of Examination

Name and Address of Owner

.....

Surrendered by

Destroyed at

Remarks

Sanitary Inspector's Initials

Form for Voluntary Surrender
of Meat, Fish or other Articles
of Food.

COUNTY BOROUGH OF WEST HAM.

(PUBLIC HEALTH DEPARTMENT).

Public Health Act, 1875.
Meat Regulations, 1924.

THIS IS TO CERTIFY

that Mr.

has this day Voluntarily surrendered to

me, the undersigned

which upon Examination (was) (were)

found to be

and unfit for the food of man.

Signed,

.....Sanitary Inspector.

Date.....192

Form for Voluntary Surrender
of Meat, Fish or other Articles
of Food.

COUNTY BOROUGH OF WEST HAM.

(PUBLIC HEALTH DEPARTMENT).

Public Health Act, 1875, and Sect. 28.
Public Health Acts Amentment Act, 1890.
Meat Regulations, 1924.

THIS IS TO CERTIFY that I, the
undersigned, being THE OWNER of

.....
which upon Examination by Mr.....

.....Sanitary Inspector to
the Sanitary Authority (are) (is) declared

by him to be

and unfit for the food of man, do hereby

Voluntarily Surrender the said.....

.....for the purpose of

having the same destroyed or so disposed

of as to prevent (it) (them) being used

for the food of man.

Signed

Date.....192

All butchers, slaughterers and stall-holders were circularized and acquainted with the new regulations, and a Sanitary Inspector visited each and personally explained the regulations. A summons was issued in one case for an infringement, but on account of the death of the offender, prior to the hearing, was not pursued.

A number of warning letters have been sent to offenders.

On the whole the butchers and stall-holders have carried out the regulations in a fairly satisfactory manner, though there is yet room for much improvement. It is by educating the public to refuse to buy food which has been exposed to contamination that butchers and others will sooner or later be compelled in their own interests to screen their goods.

Slaughter Houses.

The following is a list of private Slaughter Houses in use in West Ham, as desired by the Ministry of Health:—

	In 1920.	In Jan., 1925.	In Dec., 1925.
Registered	9	9	9
Licensed (Annually) ..	*18	*18	*16
	27	27	25

* Includes two Slaughter Houses for slaughtering horses for **Export.**

During the year 3,282 visits were paid by Sanitary Inspectors, but it was not found necessary to serve any Sanitary Notices.

It was found, however, that several slaughterers were not using a mechanical instrument in contravention to the West Ham Corporation Bye-Laws with respect to Slaughter Houses dated 25th January, 1921. These offenders were duly warned, and this Bye-Law is now being properly adhered to.

Other Foods.

There are a number of Factories dealing with food of various kinds in the Borough, and these, together with the Retail Shops, Bakehouses and other such premises are continually under the observation of the District Sanitary Inspectors.

4,206 visits were paid during the year 1925. There are 45 underground bakehouses.

The Food Inspector, who devotes the greater part of his time to the administration of the Sale of Food and Drugs Acts, is charged equally with the other Inspectors with the duty of safeguarding the sale of food in market streets and other premises where dietary articles are exposed for sale.

Street Trading.

Part VI. of the West Ham Corporation Act, 1925 (which received the Royal Assent on August 7th, 1925) deals with street trading, and confers upon the Corporation powers which are of very far-reaching Public Health importance.

Section 52 states:—"From and after the first day of January one thousand nine hundred and twenty-six it shall not be lawful for any person to sell or expose or offer for sale any article or thing from or upon any barrow, cart, stall or other receptacle occupying a stationary position at a place in the carriageway or footway of any street in the Borough without a License from the Corporation authorising him so to do. Provided that this Section shall not apply to any person selling or exposing or offering for sale any article or thing from or upon any barrow, cart, stall or other receptacle which he ordinarily moves from place to place in pursuit of his trade."

Section 57 states:—" (1) The Corporation may make Bye-Laws prescribing the days on which and the times during which articles or things may be sold or exposed or offered for sale under the authority of a licence granted or renewed under this part of this Act, and making provisions and requirements with respect to the removal of refuse the allocation, dimensions, and arrangement of barrows, carts, stalls or other receptacles, the storage and sanitary supervision (while at the place of intended sale or exposure or offering for sale) of articles of food intended to be sold or exposed or offered for sale under the authority of the license and generally as to the conditions under which articles or things may be sold or exposed or offered for sale under such authority.

“(2) The provisions of Sections 182 to 185 of the Public Health Act, 1875, so far as they relate to Bye-Laws made by an Urban Sanitary Authority shall apply to all Bye-Laws made under this Section with the substitution of the Secretary of State for the Minister of Health as the confirming authority. Provided that before confirming any Bye-Law relating to the storage and sanitary supervision of articles of food the Secretary of State shall consult the Minister of Health.”

Section 60 deals with the penalties for not complying with the Bye-Laws, etc., etc.

The Bye-Laws drawn up are as appended:—

16. A licensed street trader selling or exposing or offering for sale articles of food from any stall for human consumption:—

- (a) Shall cause such stall to be suitably covered over and to be screened in such a manner as to prevent mud, filth, or other contaminating substance being splashed or blown from the ground upon any food on the stall.
- (b) Shall cause the stall and every counter, slab, vessel or other article on or in which food is placed for sale, and all knives and other implements used in connection with the food to be thoroughly cleansed after use and to be kept at all times in a cleanly condition.
- (c) Shall take all steps as may be reasonably necessary to guard against the contamination of the food by flies.
- (d) Shall not place or cause to be placed any such article of food on, or within 18 inches of, the ground, floor, or street level, unless it is placed in a closed cupboard or other adequately protected space not less than nine inches from the ground, floor or street level.
- (e) Shall not sell or expose or offer for sale for human consumption any article of food which is contaminated by mud, filth or other contaminating substance.
- (f) Shall cause all refuse, scraps, waste material or rubbish arising from the nature of the business carried on, to be placed in properly covered receptacles kept exclusively for that purpose, and shall cause all such receptacles to be kept in a reasonably clean state, regard being had to the purpose for which they are provided.

Provided that this Bye-Law shall not apply:—

- (i.) to any articles of food in respect of which the conditions of sale or exposure or offer for sale are prescribed in any order or regulation made by the Minister of Health, and for the time being in force in the Borough; or
- (ii.) to any articles of food contained in receptacles so closed as to exclude all risk of contamination.

As these Bye-Laws have only very recently received the sanction of the Home Office it is too soon to say anything in respect to their working, but certainly these cannot but be a valuable asset in the carrying out of the supervision of food.

Veterinary Surgeon's Report.

During the year 1925 eleven Cowsheds were occupied, and I append below the four quarterly returns made to me by Mr. McCunn, your Veterinary Surgeon, with the number of cows examined. There was no evidence of contagious or infectious disease, and the animals were found to be generally in good condition.

Situation of Cowsheds.	No. of Cows examined each quarter.			
	March Quarter	June Quarter.	September Quarter.	December Quarter.
Clegg Street	15	14	14	12
Balaam Street	11	9	9	9
Edward Street	3	2	2	—
Vicarage Lane	54	58	54	53
Beale Street	8	10	10	10
Idmiston Road	15	17	17	17
Blanche Street	26	20	24	23
*Edwin Street	1	—	—	—
Beckton Road	—	—	16	14
Leyes Road (2 sheds)	—	—	5	5
Totals	133	130	151	143

* The use of this Cowshed was discontinued at the instance of the Medical Officer of Health owing to its total unsuitability.

Unsound Food Condemned.

Apples: 656lbs.	Mutton Trimmings: 30lbs.
Apricots: 30 crates.	Ox Skirt: 1.
Beasts—	Pears: 41 boxes, 1 bushel.
Crow Fats: 3.	Pigs: Bellies 7, codgut 1, crow
Forequarters: 2.	fats, omentum & spleens 3,
Gut Fats: 3.	crow fats 13, carcass and
Heads: 14.	viscera 1, livers 56, loins 2,
Heads, Collar & Mesentery:	lungs 60 pairs, mesenteries
1.	24, plucks 54, spleens 12.
Kidneys: 1.	Plaice: 1st. and 1 box.
Livers: 92 and 76½lbs.	Pork: 4st. 1 hand.
Lungs: 104 pairs.	Pork—
Mesenteries: 1.	Fat: 6lbs.
Offal: 1.	Pickled: 2lbs.
Spleens: 5.	Roker Wings: 1 box.
Tongues: 4.	Sheep—
Beef: 40st., 2 bodies & viscera,	Cauls: 4.
1 body and offal, 2 carcasses	Livers: 35.
and offal, 4 heads, collars	Lungs: 31 pairs.
and tongues.	Mesenteries: 1.
Brussel Sprouts: 20 bags.	Plucks: 1.
Cherries: 50lbs.	Skate: 1 box.
Grapes: 23 barrels.	Skate Wings: 8st. & 1 barrel.
Haddocks: 2 boxes and 1	Tomatoes: 64 boxes and 40
trunk.	bundles.
Herrings: 1 box.	Veal: 8lbs.
Kippers: 1 box.	Whelks: 1 bag.
Lobster: 1 tin.	Whiting: 5 boxes.
Mutton: 1 leg, 3 loins, 2 tar-	Winkles: 2 bags & 5 gallons.
gets, 1 fore-end, 1 shoulder.	

Samples Analysed by Borough Analyst, 1925.

Articles.	Analysed.		Genuine.		Adulterated.	
	Official.	Unofficial.	Official.	Unofficial	Official.	Unofficial.
Milk	531	6	520	5	11	1
Dried Milk	20	..	20	..	..	..
Butter	150	124	149	121	1	3
Margarine	29	10	29	10	..	..
Dripping	22	10	20	9	2	1
Lard	38	59	38	59	..	..
Lard Compound ..	1	..	1	..	..	..
Coffee	25	15	24	14	1	1
Cocoa	30	33	30	33	..	..
Vinegar	55	..	50	..	5	..
Mustard	20	17	20	17	..	..
Pepper	104	26	104	26	..	..
Ground Ginger ..	2	8	2	8	..	..
Baking Powder ..	21	5	16	4	5	1
Self-raising Flour ..	17	1	17	1	..	..
Condensed Milk ..	4	..	4	..	..	..
Cream	2	..	2	..	..	..
Preserved Cream ..	5	..	5	..	..	..
Coffee and Chicory ..	2	..	2	..	..	..
Bread	1	..	1	..	..	..
Puff Paste .. ..	..	1	..	1	..	..
Arrowroot	2	1	2	1	..	..
Cornflower	1	..	1	..	..	..
Totals ..	1,082	316	1,057	309	25	7

Public Health (Milk and Cream) Regulations, 1912 and 1917.

Summary of action taken under the above Regulations, on the lines indicated in the Department's Circular Letter No. 162, dated 7/1/1921.

1. Milk : and Cream not sold as Preserved Cream :—

	(a) No. of Samples exam- ined for the presence of a Preservative.	(b) No. in which Preservative was reported to be present, and percentage of Preser- vative found in each sample.
Milk	537	Nil.
Cream	2	Nil.

2. Cream sold as Preserved Cream :—

(a) Instances in which samples have been submitted for Analysis to ascertain if the statements on the label as to preservatives were correct—

(i.) Correct statements made	5
(ii.) Statements incorrect	—
Total	5

(iii.)	Percentage of Preservative found in each sample.	Percentage stated on statutory label.
No. 680 ...	0.26% Boric Acid ...	0.4% Boric Acid.
No. 681 ...	0.24% do. ...	do.
No. 774 ...	0.22% do. ...	do.
No. 790 ...	0.32% do. ...	do.
No. 1397 ...	0.21% do. ...	do.

(b) Determinations made of Milk Fat in Cream sold as Preserved Cream—

(i.) Above 35 per cent.....	5
(ii.) Below 35 „ „	—
	5

(c) Instances where (apart from analysis) the requirements as to labelling or declaration of preserved cream in Article V. (1) and the proviso in Article V. (2) of the Regulations have not been observed—

Nil.

(d) Particulars of each case, in which the Regulations have not been complied with, and action taken—

Nil.

3. Thickening substances :—Nil.

4. Other observations, if any :—Nil.

5. Action in connection with Paragraph 4 of the said Circular Letter 162 :—

No cases occurred in which an “ appeal to the cow ” was made.

6. Action taken under Section 4 of the Milk and Dairies (Amendment) Act, 1922 :—

There were two cases in which colouring matter (Annatto) had been added, and letters of caution were sent.

Prevalence of, and Control over, Infectious Diseases.

NOTIFIABLE DISEASES (OTHER THAN T.B.).

The following table shows the number of cases of notifiable diseases occurring during the years 1921-1925, inclusive, together with the number removed to hospitals and the total number of deaths from each disease ;—

DISEASE.	CASES NOTIFIED.					REMOVED TO HOSPITAL.					TOTAL DEATHS.				
	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925
Smallpox ..	—	3	2	—	—	—	3	2	—	—	—	1	—	—	—
Diphtheria ..	649	673	701	801	766	560	611	671	751	719	32	44	27	33	18
Scarlet Fever ..	1695	746	530	388	478	1119	592	412	320	412	11	8	7	4	6
Enteric Fever .. (including Paratyphoid)	22	14	25	19	13	7	3	10	16	5	2	2	1	4	4
Puerperal Fever ..	8	12	16	15	10	5	3	14	13	6	4	6	11	5	8
Pneumonia* ..	209	293	198	419	433	75	72	66	158	130	398	659	119	494	355
Cerebro Spinal Fever ..	1	2	1	2	5	1	—	1	1	5	1	2	3	3	4
Acute Polio Myelitis ..	3	3	5	2	1	2	1	4	2	1	—	—	—	—	—
Acute Polio Encephalitis	3	—	—	2	—	—	—	—	—	—	—	—	—	—	—
Encephalitis Lethargica†	10	2	6	26	14†	7	2	2	19	10	3	3	2	1	5†
Erysipelas ..	165	153	138	177	215	19	32	17	32	58	13	—	4	8	6
Ophthalmia Neonatorum	61	34	31	24	34	5	5	2	4	1	—	—	—	—	—
Malaria ..	3	13	—	26	8	—	—	—	16	2	—	—	—	—	—
Continued Fever ..	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—
Dysentery ..	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—

* Notification of this disease is confined to certain types of Pneumonia, and the figures given are liable to be very misleading, e.g., in 1922, though only 293 cases were notified, no fewer than 659 deaths from Pneumonia (all forms) were registered.

† One of the 5 deaths during 1925 was one of the 26 cases notified in 1924, the remaining 4 cases were first notified in 1925.

An analysis of the above table will show that there has not been an undue prevalence of any particular infectious disease during the last five years. The number of cases of Malaria are more than would be expected were it not for the fact that most of these cases have been notified from the Royal Albert Dock branch of the Seamen's Hospital, which chiefly admits cases from ships in the Dock coming from countries where Malaria is pandemic.

SCARLET FEVER (RETURN CASES).

Cases occurring within the outside margin of one month of the discharge of a case from Hospital to the same house were regarded as "Return Cases." Of the 412 admitted to Hospital 16, or 3.88 per cent. were associated with recurrent infection in this way (see also report of Medical Superintendent of Plaistow Fever Hospital, pages 73 to 82).

REPORT ON SPECIAL CASES NOTIFIED DURING 1925.

CEREBRO-SPINAL FEVER.

During the year 5 cases of Cerebro-Spinal Fever were notified (1 male and 4 females), but in two of these cases the diagnosis was not confirmed—one being a woman of 23 years, who died of Pneumonia, and the other a boy of 5 years, who recovered from Rheumatic Fever.

Of the cases that were confirmed, two (a woman of 22 years and a girl baby of 2 months) died, and a little girl of 3 years old recovered.

One other case, a boy of twelve, was not notified, he arrived from abroad suffering from Cerebro-Spinal Fever and died here.

All six cases were treated in Hospital.

POLIOMYELITIS.

Only one case of Poliomyelitis, a boy of five, was notified, and he is still under treatment and reported to be improving.

ENCEPHALITIS LETHARGICA (see preceding table).

Fourteen cases of Encephalitis Lethargica were notified (7 males and 7 females), of whom four died, a boy aged 13 years, a woman of 47, a girl of 19, and a little girl under three years of age. The woman of 47 was found at Post-mortem examination to have died of a Sarcoma. A further case was notified, but the diagnosis was not confirmed, the patient, a girl of 20 years of age, dying in hospital of Pneumococcal Meningitis; one of the 14 cases, a girl of 18, was a relapse case.

The ages of the males affected were: 43, 30, 24, 19, 17, 13 and 6 years; and of the females: 47, 42, 29, 19, 18, 10 and 2 years.

Twelve of the cases were treated in Hospital, one in the out-patient department of a hospital, and one was treated at home.

Four cases are still very ill, while one is reported to be slowly improving. Three men have been able to resume their work, and two children—though still under treatment—are well enough to return to School.

LABORATORY WORK.

In addition to the work carried out at the Plaistow Fever Hospital (see the report of the Medical Superintendent, Plaistow Hospital), and at the Tuberculosis Dispensary, other pathological specimens are examined at the Seamen's Hospital,

Greenwich, most of these specimens being submitted by private Practitioners in the Borough.

Queen Mary's Hospital, Stratford, will shortly open a Pathological Department, fully equipped with the most up-to-date apparatus. The Laboratory will be under the charge of a highly skilled Pathologist, and should prove a great asset to all concerned.

CASES OF SICKNESS VISITED AND INVESTIGATED BY THE WOMEN SANITARY INSPECTORS DURING 1925.

Measles	1,636
Chicken Pox	1,589
Whooping Cough	542
Mumps	566
Tonsillitis	472
Other cases	2,601
	<hr/>
	7,406
	<hr/>

RESEARCH COMMITTEE.

This Committee is composed of the whole of the Medical Staff of the Borough Council, Education Committee, Poor Law Authority, and of certain of the staff of the Hospitals in the Borough, together with several local Medical Practitioners. Any findings of the Committee which are considered relevant are placed before the Council's Public Health Committee for their consideration.

The work of the Committee is not so much in the nature of research itself as generally understood, but has conformed more to the definition given to that word by Lieut.-General Sir William Leishman, Director-General of the Army **Medical** Service in his address on "Research in the Medical Service," to the Royal Society of Medicine, October 12th, 1925. The address begins thus:—

"At the outset it is my purpose, if I can, to remove from your minds the impression that Research is of necessity an esoteric matter, confined to mysterious laboratories, and that it can be carried out only by professors and specialists who have given years of work to their subject, and who are 'peculiar folk' and talk in a tongue 'not understood of the people.' It is true that much experimental enquiry demands expert knowledge, special equipment, and comes within the opportunity of comparatively few of us: but I prefer to give to the word Research a much wider significance, and to take it to cover any means by which we, of set purpose, and of deliberate plan, strive to add to the existing knowledge of the cause, the prevention, and the treatment of disease."

Working on these lines, much good has ensued from the meetings, and a number of helpful suggestions have been formulated for the betterment of the health of the community.

For sources from which information concerning non-notifiable diseases are obtained see page 14.

Summary of Notifications.

Week Ending. 1925	Scarlet Fever.	Diphtheria.	Enteric Fever.	Puerperal Fever.	Small Pox.	Typhus Fever.	Cerebro Spinal Fever.	Acute Polio myelitis.	Acute Polio encephalitis.	Encephalitis Lethargica.	Erysipelas.	Ophthalmia Neonatorum.	Tuberculosis.		Pneumonia.	Malaria.	Dysentery.	Trench Fever.	Relapsing Fever.	Continued Fever.
													Respiratory.	Other Forms.						
Jan. 10	7	14	—	1	—	—	—	—	—	—	4	1	18	1	10	—	—	—	—	1
" 17	8	19	—	—	—	—	—	—	—	—	5	1	14	4	9	—	—	—	—	—
" 24	11	17	—	2	—	—	—	—	—	—	6	—	12	—	12	—	—	—	—	—
" 31	6	20	—	—	—	—	—	—	—	—	2	—	23	11	16	—	—	—	—	—
Feb. 7	8	14	—	1	—	—	—	—	—	—	4	—	25	6	23	—	—	—	—	—
" 14	7	16	—	—	—	—	—	—	—	—	4	—	22	6	12	—	—	—	—	—
" 21	5	16	—	—	—	—	—	—	—	1	5	—	22	1	9	—	—	—	—	—
" 28	6	26	—	—	—	—	—	—	—	—	4	—	9	1	7	—	—	—	—	—
Mar. 7	8	20	—	—	—	—	—	—	—	—	5	—	11	3	—	—	—	—	—	—
" 14	5	18	—	—	—	—	—	—	—	—	—	—	21	5	9	—	—	—	—	—
" 21	8	23	—	—	—	—	—	—	—	—	4	—	25	3	9	—	—	—	—	—
" 28	6	31	—	—	—	—	—	—	—	—	3	—	21	1	9	—	—	—	—	—
April 4	5	9	—	—	—	—	—	—	—	—	3	—	22	4	10	—	—	—	—	—
" 11	9	17	—	—	—	—	—	—	—	—	2	—	9	1	6	—	—	—	—	—
" 18	10	11	—	—	—	—	—	—	—	—	2	—	12	1	10	—	—	—	—	—
" 25	11	10	—	—	—	—	—	—	—	—	1	—	22	4	10	—	—	—	—	—
May 2	8	11	—	—	—	—	—	—	—	—	2	—	16	3	10	—	—	—	—	—
" 9	5	18	—	1	—	—	—	—	—	—	5	—	20	4	6	—	—	—	—	—
" 16	12	11	—	—	—	—	—	—	—	—	3	—	18	4	2	—	—	—	—	—
" 23	4	22	—	—	—	—	—	—	—	—	5	—	27	5	7	—	—	—	—	—
" 30	8	14	—	—	—	—	—	—	—	—	3	—	14	8	4	—	—	—	—	—
June 6	9	16	1	—	—	—	1	—	—	1	5	—	18	2	2	—	—	—	—	—
" 13	5	6	—	—	—	—	—	—	—	—	3	—	14	4	5	—	—	—	—	—
" 20	4	11	—	—	—	—	—	—	—	—	3	—	11	1	4	—	—	—	—	—
" 27	6	14	1	—	—	—	—	—	—	—	4	—	18	1	2	—	—	—	—	—
July 4	8	10	—	—	—	—	—	—	—	—	6	—	5	7	—	—	—	—	—	—
" 11	7	8	—	—	—	—	2	—	—	—	4	—	17	2	—	—	—	—	—	—
" 18	17	7	—	—	—	—	—	—	—	—	4	—	19	3	—	—	—	—	—	—
" 25	11	9	—	—	—	—	—	—	—	—	3	—	16	3	—	—	—	—	—	—
" 1	5	16	—	—	—	—	—	—	—	—	2	—	20	6	—	—	—	—	—	—
Aug. 8	8	13	—	—	—	—	—	—	—	—	1	—	5	—	7	—	—	—	—	—
" 15	12	13	—	—	—	—	—	—	—	—	8	—	17	—	—	—	—	—	—	—
" 22	11	8	—	—	—	—	—	—	—	—	2	—	19	3	—	—	—	—	—	—
" 29	12	12	—	—	—	—	—	—	—	—	3	—	19	2	—	—	—	—	—	—
Sept. 5	10	18	3	—	—	—	—	—	—	—	9	—	14	4	—	—	—	—	—	—
" 12	10	14	—	—	—	—	—	—	—	—	5	—	12	3	—	—	—	—	—	—
" 19	12	7	—	—	—	—	—	—	—	—	4	—	14	2	—	—	—	—	—	—
" 26	14	5	—	—	—	—	—	—	—	—	5	—	16	5	—	—	—	—	—	—
Oct. 3	12	9	—	—	—	—	—	—	—	—	2	—	11	1	—	—	—	—	—	—
" 10	11	13	—	—	—	—	—	—	—	—	6	—	13	4	—	—	—	—	—	—
" 17	15	23	—	—	—	—	—	—	—	—	4	—	22	2	—	—	—	—	—	—
" 24	12	23	—	—	—	—	—	—	—	—	6	—	11	6	—	—	—	—	—	—
" 31	13	18	—	—	—	—	—	—	—	—	8	—	9	1	—	—	—	—	—	—
Nov. 7	16	12	—	—	—	—	1	—	—	—	6	—	12	2	—	—	—	—	—	—
" 14	7	23	—	—	—	—	1	—	—	—	2	—	13	5	—	—	—	—	—	—
" 21	6	20	—	—	—	—	—	—	—	—	7	—	11	5	—	—	—	—	—	—
" 28	11	15	—	—	—	—	—	—	—	—	3	—	12	2	—	—	—	—	—	—
Dec. 5	6	12	—	—	—	—	—	—	—	—	9	—	21	2	—	—	—	—	—	—
" 12	18	9	—	—	—	—	—	—	—	—	7	—	14	5	—	—	—	—	—	—
" 19	9	15	—	—	—	—	—	—	—	—	—	—	13	3	—	—	—	—	—	—
" 26	9	12	—	—	—	—	—	—	—	—	2	—	6	1	—	—	—	—	—	—
1926	—	—	—	—	—	—	—	—	—	—	8	—	13	—	—	—	—	—	—	—
Jan. 2	15	18	—	—	—	—	—	—	—	—	—	—	13	1	29	—	—	—	—	—
TOTALS	478	766	13	10	—	—	5	1	—	14	215	34	802	168	433	8	1	—	—	2

Disinfection.

The following return sets out the diseases for which disinfection took place during 1925:—

Disease.	North.		South.		Totals.
Scarlet Fever	254	...	290	...	544
Diphtheria	356	...	547	...	903
Enteric Fever	7	...	8	...	15
Puerperal Fever	2	...	3	...	5
Phthisis	383	...	371	...	754
Encephalitis Lethargica ...	15	...	8	...	23
Cerebro-Spinal Fever	2	...	3	...	5
Erysipelas	6	...	5	...	11
Pneumonia and Measles ...	15	...	3	...	18
Cancer	19	...	12	...	31
Schools (Classrooms)	99	...	122	...	221
General Infection	43	...	30	...	73
Disinfestation	71	...	47	...	118
Total					2,721

Plaistow Hospital for Infectious Diseases.

Annual Report for 1925.

The total number of cases treated in the Hospital during 1925 showed an increase of 95 over the number treated in the previous year. The type of disease, however, was, on the average, milder. The total deaths during the year numbered 49 as compared with 80 in 1924.

There was a slight increase in the number of admissions from Scarlet Fever and Diphtheria, but the type of disease in each case remained mild. Measles and Whooping Cough were not so prevalent or severe as in 1924; the deaths from these two diseases were 14 as compared with 34 in the previous year. The incidence of Typhoid Fever remained low.

The chief causes of death during the year are briefly summarised as follows:—

Scarlet Fever caused	4 deaths
Diphtheria	18 „
Typhoid Fever	1 „
Measles	6 „
Whooping Cough	8 „
Pneumonia	2 „
Other diseases	10 „
—	
Total	49
—	

The mortality rate, calculated on all the cases admitted, was 3.43 per cent.

It may be of interest to review the prevalence of Scarlet Fever, Diphtheria and Typhoid Fever in the Borough as shown by the admissions to the Hospital since it was opened in 1896, and in Table I. there is shown the annual admissions and deaths from these diseases during the past thirty years. The building of the Hospital was not completed until 1901 and Typhoid Fever cases were not admitted until that year. From this Table it will be seen that the prevalence of Typhoid Fever has greatly diminished in recent years and there are good reasons to hope that with the continued improvement in sanitation and the general standard of living this disease may shortly be stamped out. With regard to Scarlet Fever, marked fluctuations have occurred in its prevalence, but the general type of the disease has become milder as shown by the fall in the case mortality. Diphtheria, on the other hand, shows a steady increase in prevalence during recent years, and though the mortality has been low in the past three years it is impossible to say if this level can be maintained. Hospital treatment and isolation do not appear to have had any effect on the prevalence of either Scarlet Fever or Diphtheria though they may have contributed to the reduction in the mortality rate. There are good prospects, however, that these diseases may soon be prevented by the inoculation of susceptible individuals. This has already been carried out in the case of Diphtheria and appears to give excellent results.

TABLE I.

Showing the annual admissions and deaths from Scarlet Fever, Diphtheria and Typhoid Fever since the Hospital was opened in 1896.

Year.	Scarlet Fever.		Diphtheria.		Typhoid Fever.	
	Admissions.	Deaths.	Admissions.	Deaths.	Admissions.	Deaths.
1896	170	8	114	23	..	..
1897	188	6	163	21	..	..
1898	206	4	249	42	..	..
1899	192	2	309	49	..	..
1900	177	4	269	36	..	..
1901	203	16	310	66	47	4
1902	257	12	431	72	138	30
1903	370	10	334	48	84	17
1904	679	29	351	31	95	15
1905	747	18	438	53	62	14
1906	806	18	421	70	127	18
1907	667	29	422	82	68	12
1908	665	26	373	47	73	12
1909	990	32	337	35	34	5
1910	655	17	260	45	71	14
1911	491	13	295	52	79	15
1912	562	17	291	35	49	10
1913	782	13	333	24	42	6
1914	699	10	380	43	36	7
1915	575	8	403	60	40	11
1916	310	7	533	64	23	2
1917	304	8	559	67	27	4
1918	213	4	464	70	25	0
1919	373	3	601	57	15	2
1920	748	6	769	62	14	3
1921	1,119	10	560	32	7	0
1922	592	8	611	40	3	1
1923	412	7	671	23	10	0
1924	317	4	713	27	2	1
1925	412	4	719	18	5	1

On 1st January, 1925, 228 cases were resident in the Hospital, and 1,427 were admitted, making a total of 1,655 cases under treatment during the year. Of these 1,392 were discharged recovered, 49 died, and 214 remained under treatment at the end of the year.

The following Table shows the admissions and deaths for each month of the year:—

TABLE II.

1925.	ADMISSIONS.										DEATHS.											
	Scarlet Fever.	Diphtheria	Typhoid Fever.	Measles.	Whooping Cough.	Chicken- pox.	Erysipelas.	Pneumonia.	Rubella.	Other Diseases.	Total.	Scarlet Fever.	Diphtheria.	Typhoid Fever.	Measles.	Whooping Cough.	Chicken- Pox.	Erysipelas.	Pneumonia.	Rubella.	Other Diseases	Total.
January	30	74	..	..	6	1	..	..	..	8	119	1	3	..	..	..	..	..	..	..	1	5
February	17	67	..	..	5	2	1	2	..	6	100	..	1	..	..	3	..	..	..	..	1	5
March	33	90	..	..	1	1	1	..	..	13	139	1	3	..	..	2	..	..	..	..	2	8
April	30	49	..	2	4	..	..	..	..	14	99	..	2	..	..	1	..	..	..	..	..	3
May ..	30	55	..	3	..	2	..	1	1	9	101	..	1	..	1	..	..	..	..	..	1	3
June .	24	54	1	8	..	1	1	3	2	5	99	..	2	..	..	1	..	..	1	..	..	4
July ..	32	43	2	2	2	..	2	2	2	7	94	..	..	..	1	..	..	..	1	..	..	2
August	40	48	..	3	1	2	3	1	2	17	117	1	..	..	..	..	..	1	..	..	1	3
September	48	50	...	4	2	1	2	1	1	14	123	..	..	..	..	1	..	..	..	..	..	1
October	42	67	..	5	1	1	1	2	2	9	130	..	2	..	1	..	..	..	..	..	1	4
November	24	51	1	23	..	..	1	4	2	7	113	1	..	1	1	..	..	..	..	..	..	3
December	62	71	1	31	..	..	2	8	1	17	193	..	4	..	2	..	..	..	..	..	2	8
Totals	412	719	5	81	22	11	14	24	13	126	1,427	4	18	1	6	8	..	1	2	..	9	49

SCARLET FEVER.—The total number of cases under treatment was 470, which is 61 more than in the previous year. Of these, 399 were discharged recovered, 4 died, and 67 remained under treatment at the end of the year. Of the 4 fatal cases, one suffered from shock due to burns; septic complications and broncho-pneumonia were contributory causes of death in the other 3 cases. The fatality rate was .97 per cent. of the admissions.

In 52 cases the disease was complicated by the presence of other infections as follows:—

Scarlet Fever with Diphtheria	...	10 cases
„ „ „ Measles	...	12 „
„ „ „ Whooping Cough		8 „
„ „ „ Mumps	...	9 „
„ „ „ Chickenpox	...	13 „

Twenty-nine cases admitted as Scarlet Fever proved to be wrongly diagnosed and were found after admission to be suffering from the following diseases:—

Measles, 8; Rubella, 7; Septic rash, 2; Urticaria, 2; Erythema, 3; Tonsillitis, 2; Jaundice, 2; Chickenpox, 1; Lobar Pneumonia, 2.

Four cases admitted as Diphtheria were found to be suffering from Scarlet Fever.

Complications:—Of the 399 cases discharged during the year 262 or 65.6 per cent. suffered from complications as follows:—

Arthritis	...	13 cases or 3.2 per cent.
Otorrhœa	...	30 „ 7.5 „
Nephritis	...	8 „ 2.0 „
Albuminuria	...	34 „ 8.5 „
Cardiac affections		4 „ 1.0 „
Adenitis	...	122 „ 30.5 „
Rhinitis	...	51 „ 12.7 „

The average duration of residence of all the cases was 46.88 days.

DIPHTHERIA.—The prevalence of Diphtheria in the Borough still remains high. The admissions in 1925 were 719, which is the largest number for the past five years. The majority of the cases, however, were of a mild type as shown by the total deaths which numbered 18, the lowest figure yet recorded. During the year a large number of swabs were examined for the practitioners in the Borough, but it is impossible to estimate to what extent, if at all, the practice of routine throat swabbing has affected the mortality from the disease. Unfortunately, bacteriological examination is not always reliable; a "negative swab" cannot be taken as a guarantee that any particular case is not suffering from Diphtheria. This fact was demonstrated by two of the fatal cases last year. In each of these the swab taken at the outset by the practitioner was found to be negative, but three to four days later the true nature of the condition became obvious from the clinical symptoms, but it was too late then for antitoxin to have much effect. Early treatment is of such vital importance in Diphtheria that the mortality would probably be much reduced if it became a wider practice among practitioners to give a small injection of antitoxin to all suspicious cases instead of waiting for the result of a swab.

The total number of cases under treatment during the year was 880. Of these, 758 were discharged recovered, 18 died, and 104 remained under treatment at the end of the year.

In 58 cases the larynx and trachea were involved. Of these, 33 recovered without operation. Tracheotomy was performed in 25 cases; 6 of these were patients recovering from Measles, and in 2 cases Whooping Cough was present as a complication. Seven deaths occurred among the tracheotomy cases, giving a fatality rate of 28 per cent. of those operated on. The fatality rate of all the cases admitted was 2.5 per cent.

The average duration of illness of the fatal cases prior to admission was 4 days, and the average age was $3\frac{1}{2}$ years. The amount of antitoxin given to the fatal cases averaged 62,000 units, while the average amount for all the cases was 15,000 units. The duration of residence of all the Diphtheria cases averaged 54.34 days.

One hundred and nine cases admitted as Diphtheria proved to be wrongly diagnosed and were found after admission to be suffering from the following complaints:—

Tonsillitis, 76; Laryngitis, 6; Measles, 7; Vincent's Angina, 2; Broncho-Pneumonia, 5; Bronchitis, 3; Quinsy, 1; Mumps, 3; Adenitis, 1; Hydrocephalus, 1; Marasmus, 2; Chickenpox, 1; Retro-pharyngeal abscess, 1.

TYPHOID FEVER.—11 cases, notified as Typhoid Fever, were admitted during the year. Of these, 5 proved to be suffering from the disease and one of them died. The other 6 cases were found after admission to be suffering from the following complaints:—

Enteritis, 2; Pneumonia, 1; Cerebro-spinal Fever, 1; Ulcerative Colitis, 1; Pyelo-nephritis, 1.

MEASLES.—This disease became very prevalent in the Borough towards the end of the year. The total number of cases under treatment was 82. Of these 55 were discharged recovered, 6 died, and 21 remained under treatment at the end of the year. The fatality rate was 7.3 per cent. of the admissions. Eight cases admitted as Scarlet Fever and 7 as Diphtheria proved after admission to be suffering from Measles. These cases infected 9 patients in the Hospital. Six susceptible contacts were injected with 5 cubic centimetres of blood from convalescent measles patients and did not afterwards contract the disease. Of the 6 fatal cases 5 suffered from broncho-pneumonia, and one from ulcerative laryngitis.

WHOOPING COUGH.—25 cases were under treatment during the year. Of these, 17 were discharged recovered, and 8 died. The fatal cases were children under 5 years and all of them suffered from complications as follows:—Broncho-pneumonia, 4; Tubercular Meningitis, 2; Miliary Tuberculosis, 1; Marasmus, 1. The fatality rate was 32 per cent.

The disease was also present as a complication in 8 cases of Scarlet Fever and in 10 cases of Diphtheria.

CHICKENPOX.—11 cases were admitted during the year. They were all of a mild type and there were no deaths. The disease was also present in combination with Scarlet Fever in 13 cases, with Diphtheria in 7 cases, and with Measles in 4 cases.

ERYSIPELAS.—15 cases were under treatment during the year. They were all moderately severe. Eight of the cases were adults, 3 male and five female; the others were children under 12 years: The face was the situation affected in 12 cases, the leg in 2 cases. One case proved fatal, a baby, aged 6 months, who had a very severe attack which involved the greater part of the body.

RUBELLA.—13 cases were under treatment, all of them mild. Seven cases had been notified as Scarlet Fever, and 3 as Measles. None proved fatal, and there were no complications.

PNEUMONIA.—24 cases were under treatment. Of these 17 were discharged recovered, 2 died, and 5 remained under treatment at the end of the year. The fatal cases were both children aged 3 years and 4 years respectively.

OTHER DISEASES.—Under this group are classed diseases which are not regularly admitted and also cases in which the diagnosis was changed after admission. The following are the diseases included in the group:—

Tonsillitis, 78; Laryngitis, 6; Bronchitis, 4; Enteritis, 5; Cerebro-spinal Meningitis, 2; Encephalitis Lethargica, 2; Abscess of scalp, 1; Bromide, rash, 1; Cervical Adenitis, 1; Congenital Hydrocephalus, 1; Endocarditis, 1; Erythema, 2; Marasmus, 2; Mosquito bites, 1; Mumps, 6; Nephritis, 1; Otitis Media, 1; Pneumococcal Meningitis, 1; Quinsy, 1; Retro-pharyngeal abscess, 1; Rheumatic fever, 1; Septic rash, 2; Tubercular Meningitis, 1; Thrush, 1; Ulcerative Colitis, 1; Vincent's Angina, 2.

Of these cases, 9 proved fatal as follows:—

Cerebro-spinal Meningitis	...	...	2 cases
Pneumococcal Meningitis	...	...	1 case
Tubercular Meningitis	...	...	1 „
Congenital Hydrocephalus	...	...	1 „
Bronchitis	...	...	1 „
Endocarditis	...	...	1 „
Nephritis	...	...	1 „
Ulcerative Colitis	...	...	1 „

THE GRANGE CONVALESCENT HOME.—The Convalescent Home was used during the year for patients convalescing from Diphtheria. The total number of cases transferred there from Plaistow Hospital was 474. Of these, 438 were discharged, and 36 remained in residence at the end of the year. Patients are kept at the Home for periods varying from 3 to 9 weeks; the average duration of residence during the year was 38.8 days.

At the beginning of the year an additional acre of land adjacent to the kitchen garden was fenced in and planted with fruit trees. The gardens keep the Home supplied with vegetables and a good quantity of fruit. Over 5,000 eggs were supplied last year from the poultry kept at the Home.

STAFF ILLNESS.—86 nurses and maids have been warded during the year with various complaints. Six nurses contracted Scarlet Fever, 6 had mild attacks of Diphtheria, and 3 contracted Mumps; all recovered. 19 nurses and maids have been warded with sore throat, 16 with influenza, and 36 others had been off duty for short periods through minor ailments; all recovered.

GATE CASES.—The following is a record of cases suspected to be suffering from infectious disease which were brought direct to the Hospital for diagnosis:—

Number sent by medical practitioners	229
„ of these admitted	133
„ brought by relatives	367
„ of these admitted	124
„ from other hospitals	25
„ of these admitted	16
Total number of cases examined	621
„ „ these admitted	273

BACTERIOLOGICAL WORK.—In addition to the routine bacteriological work of the Hospital, the following examinations were made for medical practitioners:—

Throat swabs for Diphtheria	...	...	1,585
Number which proved positive	...	...	186
Nasal swabs for Diphtheria	...	...	85
Number which proved positive	...	...	37
Ear swabs for Diphtheria	...	...	14
Number which proved positive	...	...	7
Eye swabs (negative)	...	...	3
Widal Tests (negative)	...	...	2
Total number of examinations	...	...	1,689
Total number of positive swabs	...	...	230

DICK TEST.—This test was performed during the year on 48 nurses and 62 convalescent diphtheria patients. Of the 48 nurses 11 gave positive reactions and 2 of these contracted Scarlet Fever later. Of the 62 patients, 27 gave positive reactions.

SCHICK TEST.—This test was performed on 38 Scarlet Fever convalescents, and of these 29 gave positive reactions and 9 were negative. It was also performed on 35 Diphtheria convalescents, and of these 30 were negative and 5 gave pseudo-negative reactions.

AMBULANCES AND DISINFECTING VANS.—The number of journeys made by the two motor ambulances during the year was 1,144. The mileage run was 5,720.

In the collection and delivery of infected clothing the two motor vans made 3,178 journeys, and mileage run was 10,230.

All minor repairs to the motor vehicles are carried out by the Engineer's staff.

D. MACINTYRE,
Medical Superintendent.

Tuberculosis.

The following table sets out the number of notified cases of Tuberculosis and the number of deaths during the year at certain age periods, distinguishing separately the pulmonary and non-pulmonary forms, males and females:—

AGE PERIODS.				NEW CASES.				DEATHS.			
				Pulmonary.		Non-pulmonary		Pulmonary.		Non-pulmonary	
				M.	F.	M.	F.	M.	F.	M.	F.
0	..	..	..	2	1	3	2	3	1	4	1
1	..	..	..	15	14	26	17	8	6	13	14
5	..	..	..	50	39	18	9	3	2	4	7
10	..	..	..	37	36	16	18	4	3	2	3
15	..	..	..	57	51	6	11	17	21	2	2
20	..	..	..	51	54	2	6	25	22	1	
25	..	..	..	80	73	6	3	28	20	3	..
35	..	..	..	62	52	3	8	47	19	2	2
45	..	..	..	47	31	4	2	35	13	2	1
55	..	..	..	23	13	..	1	16	8	..	..
65 and upwards	..		..	8	7	1	2	6	2	..	2
Totals	..	..	..	432	371	85	79	192	117	33	32

Included in the above new cases are 19 pulmonary males, 10 pulmonary females, 9 non-pulmonary males, and 4 non-pulmonary females, which were not notified but were discovered from the returns of the Registrars of Births and Deaths, etc., showing that 11.2 per cent. of the deaths registered as due to Tuberculosis had not been notified during life.

The total number of cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the year was 967, of which 803 were pulmonary cases. The deaths due to this disease numbered 374, giving a death rate of 1.18 per 1,000.

The death rate from respiratory Phthisis being 0.97 and from other forms 0.21 per 1,000.

Table showing death rate from Tuberculosis per 1,000 deaths during last five years:—

		Pulmonary.		Non-Pulmonary.
1921	...	1.01	...	0.26
1922	...	0.94	...	0.23
1923	...	0.95	...	0.22
1924	...	0.97	...	0.22
1925	...	0.97	...	0.21

The Reports of the Tuberculosis Officer and of the Medical Superintendent of Dagenham Sanatorium will be found on pages 84 to 94.

Tuberculosis Dispensary—Annual Report of Tuberculosis Officer.

(1) Co-operation with General and Special Hospitals, etc.

GENERAL AND SPECIAL HOSPITALS.

These Hospitals usually communicate with the Dispensary whenever they have cases of Tuberculosis requiring treatment. Appointments are made for such cases and they are seen without delay. Frequently, the cases are sent by ambulance to the Dispensary. These remarks apply chiefly to the London Hospital, Queen Mary's Hospital, City of London Hospital and Brompton Hospital.

Cases in which an X-ray examination is desired are sent either to the London Hospital or Queen Mary's Hospital. Payment has been made for reports in one or two cases otherwise this is done gratuitously.

SCHOOL CLINICS.

Many cases are referred by the School Medical Officer. The result of examination and other information are communicated to the School Medical Officer. Contacts examined at the Dispensary, not tuberculous, are referred to the School Medical Officer as possible cases for Open Air School.

(2) Co-operation with Medical Practitioners and co-ordination of work.

DOUBTFUL CASES.

Cases are daily referred, usually by letter, to the Tuberculosis Officer for opinion. The findings at the Dispensary are communicated to the Practitioner at the earliest possible moment by letter. No formal letter has yet been adopted for the purpose. Form G.P. 35 is used in some cases.

NOTIFIED CASES.

Form G.P. 17 (revised) is used in a certain number of cases. The Practitioner is informed of the results of examination and of the treatment recommended in each case. The Practitioner concerned is notified of the admission of the case to Institution and also of the death of his patients in Institution.

After discharge from Sanatorium, the patient is examined at the Dispensary or at home, if necessary, and the Practitioner is then informed of the treatment recommended, capacity for work, and other details of interest noted during the period of Residential Treatment.

Practitioners furnish quarterly, or when requested, the domiciliary progress reports on cases under their care. The failure of a patient to attend at his Doctor's Surgery is a frequent cause of delay in completing such forms.

(3) The arrangements for following up patients in cases in which the diagnosis is doubtful.

The procedure is as follows:—

After the first examination a card is given to the patient with the date of the next attendance. When a patient fails to attend, after the elapse of a week a letter is sent making another appointment. If the patient still fails to attend, the practitioner concerned is informed of the fact.

(4) The arrangements for securing the examination and systematic supervision of home contacts.

Visiting Nurses make arrangements for examination of contacts. Supervision of contacts is carried out at the Dispensary in special cases. In other cases, at their homes by Visiting Nurses.

(5) Information as to special methods of diagnosis and treatment in use, and the number of persons to whom these special methods have been applied.

DIAGNOSIS.

X-ray examinations have been required in a certain number of cases.

TREATMENT.

Nothing special in use.

(6) The results of local experience as to the relative value of each form of treatment.

My observations have, so far, been limited to a few months. My experience, so far, is not adequate to enable me to express an opinion on the relative value of the various forms of treatment.

(7) The nature and extent of Dental Treatment provided, etc.

Extractions and fillings required by patients while undergoing Sanatorium Treatment have been paid for by the Council.

Fillings and Extractions—11.

(8) Arrangements for the provision of Nursing.

There are none.

EXTRA NOURISHMENTS.

A Fund is provided to supply Extra Nourishments to patients at home. Grants are made by the Tuberculosis

Officer after consideration of the financial and other circumstances of the case. There is constant supervision of the cases thus supplied to ensure that patients carry out general instructions re precautions, medical treatment, etc., to ascertain that they are really in need of and require the grant.

(9) Treatment of Non-Pulmonary Tuberculosis.

TUBERCULOSIS OF SKIN.

These cases are treated at the London Hospital as out-patients. In the event of Finsen or Artificial Sunlight being recommended, payment is made.

TUBERCULOSIS OF BONES AND JOINTS.

ADULTS.—There are no special institutions. Two or three cases have been sent to the Royal Sea-Bathing Hospital. Others are treated at the various London and Local Voluntary Hospitals.

CHILDREN.—These are sent to the Alexandra Hospital, Swanley. The authorities have arranged to let us have the use of ten beds.

PROVISION OF SURGICAL APPARATUS.

Surgical Apparatus have been provided in certain cases, recommended by the Surgeon-in-Charge, after examination of the case and careful consideration of all the circumstances by the Tuberculosis Officer.

(10) Arrangements for Care and After-Care, etc.

On return from Residential Treatment, the patient is examined at the Dispensary, if able to attend. In the case of insured persons, domiciliary treatment is usually recommended. The Panel Practitioner is informed of this fact and of other essential details of the case. Extra Nourishment is granted when the circumstances require it. The Tuberculosis Nurse visits periodically and reports to the Tuberculosis Officer. Form G.P. 36 is received periodically.

In this way the Tuberculosis Officer is informed of the progress of the case and of any changing circumstances, financial or otherwise.

Whenever possible, the patient is advised to return to his or her former occupation.

In the case of the non-insured, when fit, the patient attends at the Dispensary, otherwise the patient is advised to consult a General Practitioner.

(11) Local Arrangements for finding employment for Patients.

There are none.

(12) Supply and supervision of shelters at the homes of Patients.

None have been supplied in recent years.

(13) The Incidence of Tuberculosis—Occupational.

No data.

(14) Prevention of Tuberculosis. Special methods adopted.

ISOLATION OF AN ADVANCED CASE.

Hospital treatment is advised wherever possible. When treatment at home is carried out, the importance of isolation is urged and impressed upon relatives by Visiting Nurses.

SEARCH FOR CONTACTS.

Constant search is made by Visiting Nurses for cases suspected or suspicious.

OPEN-AIR SCHOOL.

Cases in which infection is almost certain but show no definite signs of active disease are drafted to the School Medical Department with a view to admission to an Open-Air School. This is a valuable Institution, not only that the child is given a healthy environment but is removed from a dangerous one,

(15) Special difficulties encountered.

OVERCROWDING, due to the shortage of houses and poverty, is undoubtedly, a great difficulty. It renders isolation impossible and increases the risk of infection and lowers resistance to attack.

UNEMPLOYMENT.—The presence of thousands of unemployed creates in the employed person a fear of losing his employment, and compels him to continue at work or to return to work when he should remain at home. The fact that so many able-bodied are out of work renders the task of a tuberculous workman in search of a job almost hopeless. Advanced cases are met with from time to time. I have noticed more often that these are uninsured persons working on their own account in some small business and who postpone medical treatment until the last possible moment.

During the last five years important changes have taken place at the Dispensary.

In 1921 the administration of Sanatorium Benefit ceased to be a function of the Insurance Committee and the Council became responsible for the provision of Institutional Treatment and the Tuberculosis Officer became responsible for the administration of the treatment of domiciliary cases. The staff of the Dispensary was increased by the addition of two for the extra clerical work. These two clerks were transferred from the staff of the Insurance Committee.

In 1922, owing to the increase in the number of cases, the premises were extended by addition of consulting room with waiting and dressing rooms. An assistant, Dr. Kilgour, was appointed.

In 1925 the accommodation at the Dagenham Sanatorium was increased by the opening of new wards holding 24 beds.

The administration of Institutional Treatment for children, formerly carried out by the Medical Officer of Health, was taken over by the Dispensary.

In February, 1925, the present Tuberculosis Officer was appointed and took up his duties three months later.

P. A. GALPIN,
Tuberculosis Officer.

Return showing the work of the Dispensary (or Dispensaries) during the year 1925.

DIAGNOSIS.	PULMONARY.			NON-PULMONARY.			TOTAL.		
	Adults.		Children.	Adults.		Children.	Adults.		Children.
	M.	F.	M.	F.	M.	F.	M.	F.	M.
	M.	F.	M.	F.	M.	F.	M.	F.	F.
A.—NEW CASES examined during the year (excluding contacts):—									
(a) Definitely tuberculous	212	174	39	40			226	200	91
(b) Doubtfully tuberculous	—	—	—	—	14	26	49	42	40
(c) Non-tuberculous	—	—	—	—	—	—	103	83	66
									74
									35
									55
B.—CONTACTS examined during the year:—									
(a) Definitely tuberculous	—	14	9	8	—	2	—	16	12
(b) Doubtfully tuberculous	—	—	—	—	—	—	2	21	38
(c) Non-tuberculous	—	—	—	—	—	—	74	190	184
									247
C.—CASES written off the Dispensary Register as									
(a) Cured	—	—	1	—	—	—	—	—	1
(b) Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error)	—	—	—	—	—	—	175	268	241
									298
D.—NUMBER OF PERSONS on Dispensary Register on December 31st:—									
(a) Diagnosis completed	165	176	67	67	12	26	177	202	122
(b) Diagnosis not completed	—	—	—	—	—	—	40	53	63
									103
									70

These figures refer to persons examined for the first time during the year 1925.

This figure has been obtained from the Nurses' lists.	1. Number of persons on Dispensary Register on January 1st	2,919	9. Number of patients to whom Dental Treatment was given, at or in connection with the Dispensary	11
2. Number of patients transferred from other areas and of "lost sight of" cases returned—"1925" cases only	6		10. Number of consultations with medical practitioners:— (a) At Homes of Applicants .. } Not recorded (b) Otherwise .. }	185
3. Number of patients transferred to other areas and cases "lost sight of"—"1925" cases only..	30		11. Number of other visits by Tuberculosis Officers to Homes	
4. Died during the year	190		12. Number of visits by Nurses to Homes for Dispensary purposes	4,121
5. Number of observation cases under A (b) and B (b) above in which period of observation exceeded 2 months.. ..	139		13. Number of (a) Specimens of sputum, etc., examined (b) X-ray examinations made } in connection with Dispensary work.	574 4
6. Number of attendances at the Dispensary (including Contacts).. ..	13,024		14. Number of Insured persons on Dispensary Register on the 31st December—"1925" cases only	602
7. Number of attendances of non-pulmonary cases at Orthopædic Out-stations for treatment or supervision	Nil.		15. Number of Insured Persons under Domiciliary Treatment on the 31st December	310
8. Number of attendances, at General Hospitals or other Institutions approved for the purpose, of patients for (a) "Light" treatment (b) Other special forms of treatment	1,287 Not recorded.		16. Number of reports received during the year in respect of Insured Persons:— (a) Form G.P. 17 (b) Form G.P. 36	1 786

Dagenham Sanatorium.

Annual Report for the Year 1925.

At the end of 1924 the number of patients remaining under treatment were:—

Males	63
Females	34—— 97

The total admissions during 1925 were:—

Males	189
Females	123——312

The number of deaths were:—

Males	37
Females	14—— 51

Discharges during the year totalled:—

Males	139
Females	96——235

Leaving under treatment on 31st December, 1925:—

Males	76
Females	47——123*

* Includes 23 non-insured persons.

The classes of cases discharged and the results were as follows:—

	Stage I.		Stage II.		Stage III.
Males	54	...	36	...	49
Females	57	...	23	...	16
	Quiescent.		Improved.		Unimproved, Stationery or Worse.
Males	51	...	69	...	19
Females	34	...	48	...	14

The average gain in weight was 8 lbs.

Insured persons admitted during the year totalled 239, the remaining 73 being non-insured.

76 ex-service men were admitted to the Sanatorium during the same period.

The Death Rate (calculated on admissions) was 16.34 per cent.

In the case of Males the percentage was 19.57.

In the case of Females the percentage was 11.38.

Average duration of residence (both sexes) was 131.07 days.

The average for Males was 132.3 days.

The average for Females was 129.11 days.

The Sanatorium closed down on the 1st April, 1920, owing to the outbreak of Smallpox, and re-opened in July, 1922. The number of beds available on re-opening were 68—40 beds for male Sanatorium cases, 14 beds for male Hospital cases and 14 beds for female cases. After re-opening, a further 12 beds were provided for Male Sanatorium cases in one of the temporary out-buildings, after the necessary alterations were carried out, bringing the total up to 80.

Owing to the large number of cases awaiting admission, especially female cases, it was found necessary to provide further accommodation, and another temporary building was altered to take 24 female cases in 1923. Though this eased the situation considerably, it was necessary to provide still further beds, and the adjoining ward was opened in 1925 to accommodate 24 more female cases.

The ward originally used in the permanent building for 14 female cases was then used for male Hospital cases, and enabled all the female cases to be placed in adjacent wards, which has proved highly satisfactory from every point of view. The extra accommodation provided has made it possible to have cases admitted, if not at once, shortly after they are recommended for treatment, and so enable cases to have early treatment, which is of paramount importance. Recent statistics show that the number of advanced cases coming under treatment are lower than formerly owing to this extra accommoda-

tion. A considerable number of advanced cases will, however, always have to be admitted as, for various reasons, they do not reach the Dispensary until the disease is well advanced.

The following is the present accommodation available : —

Male Sanatorium Beds	52
Male Hospital Beds	28
Female Sanatorium Beds	24
Female Hospital Beds	24
<hr/>	
Total	128
<hr/>	

A most disappointing factor is the number of cases that take their discharge annually before receiving the maximum benefit, mostly due to financial and other domestic affairs.

Several new forms of treatment, combined with Sanatorium, have been tried in recent years in Pulmonary cases, the results so far cannot yet be considered encouraging, except in the cases of artificial Pneumo-thorax, which in a limited number of cases has given satisfactory results. The question of adopting this form of treatment in the Sanatorium in the future is one for serious consideration.

During the year a number of concert parties visited the Sanatorium, and the concerts were much appreciated by the patients.

Whist Drives and billiard handicaps were also arranged.

The wireless installation has been brought up to date, and headphones placed at the head of all the Hospital beds. The result has been most satisfactory and given great pleasure to the bed patients.

G. M. MAYBERRY,

Medical Superintendent.

Venereal Diseases.

Under the Public Health (Venereal Diseases) Regulations, 1916, West Ham is included in the Joint Scheme approved for the Greater London Area, the participating authorities being the London County Council, the Counties of Middlesex, Essex, Hertford, Buckingham, Surrey and Kent, and the County Boroughs of West Ham, East Ham and Croydon. Under the Scheme free treatment can be obtained by anyone (who has acquired Venereal disease) at any of the 28 Hospitals approved under the joint agreements. There are also seven Hostels, assisted by financial grants, where women suffering from either of these diseases can be accommodated, with a view to facilitating continued treatment. Provision is made for enabling Medical Practitioners to obtain laboratory reports on suspected material or specimens, and for the free supply of Salvarsan substitutes to practitioners who have obtained the necessary qualification to be placed on the approved list. In addition to paying its proportionate share of the cost of carrying out the Scheme, approximately one-twenty-fifth of the total expenses incurred, the Council makes a grant of £100 per annum to the National Council for Combating Venereal Diseases to further propaganda work throughout the whole area.

In this connection several lectures were delivered at various centres by Lecturers from the British Social Hygiene Council Incorporated.

Posters and enamel plaques pointing out the dangers of Venereal Diseases, urging immediate treatment and giving a list of Hospitals where treatment may be obtained free of cost, are exhibited in many parts of the Borough and in all public sanitary conveniences.

All local Medical Practitioners are fully conversant with the facilities for diagnosis and treatment of Venereal Disease, and have a printed circular setting out all relevant details in connection with the Scheme. There are six practitioners who are qualified to receive supplies of arseno-benzol compounds. The attached tables show the use made of the various centres by patients and practitioners.

The following tables show the summary of work done under the Scheme during the past five years, setting out for comparison the particulars relating solely to West Ham and those relating to the whole of the participating authorities.

**Table of Hospitals treating Venereal Diseases
under the L.C.C. Scheme.**

ALBERT DOCK.

CHARING CROSS.

DISEASES OF SKIN.

E. G. ANDERSON.

GT. ORMOND STREET.

GUY'S.

KING'S COLLEGE.

{ LOCK (MALE).
{ LOCK (FEMALE).

LONDON.

METROPOLITAN.

MIDDLESEX.

MILLER GENERAL.

ROYAL FREE.

ROYAL LONDON OPHTHALMIC.

ROYAL NORTHERN.

ST. GEORGE'S.

ST. JOHN'S, SKIN.

ST. JOHN'S, LEWISHAM.

ST. MARY'S.

ST. PAUL'S.

ST. THOMAS'.

SEAMEN'S.

SOUTH LONDON FOR WOMEN.

UNIVERSITY.

WEST LONDON.

WESTMINSTER.

S.A., MOTHERS'.

CHILDREN'S, WADDON.

Summary of work done by Hospitals.

	WEST HAM CASES.					TOTAL CASES OF TEN AUTHORITIES.				
	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925
New Patients:—										
Syphilis ..	240	157	208	166	120	8,188	6,401	6,565	6,127	5,454
Soft Chancre ..	17	20	18	7	5	471	264	312	237	212
Gonorrhœa ..	313	310	281	241	198	10,709	10,035	10,762	10,632	10,550
Not Venereal ..	349	278	348	286	238	6,050	5,943	6,446	7,087	8,387
Total ..	919	765	855	700	561	25,418	22,643	24,085	24,083	24,603
Total attendances ..	9,294	9,280	9,744	9,971	10,039	496,209	514,857	539,373	569,021	632,667
No. of In-patient days ..	1,038	1,558	1,396	838	1,227	79,692	92,037	85,381	80,593	81,335
Salvarsan Subs. doses ..	1,334	1,007	1,179	1,240	921	74,730	55,202	50,852	48,020	48,237

PATHOLOGICAL SPECIMENS EXAMINED.

For or at a Centre:										
Spirochaetes ..	50	39	17	12	4	1,598	1,046	729	850	1,268
Gonococci ..	784	762	727	725	910	27,857	32,539	27,607	38,828	57,150
Wasserman ..	667	640	729	690	495	30,482	30,996	30,129	30,002	30,426
Others ..	8	12	20	9	39	6,197	9,319	9,911	12,154	14,110
Total ..	1,509	1,453	1,493	1,436	1,448	66,134	73,900	68,376	76,834	102,954
For Practitioners:										
Spirochaetes ..	1	..	..	1	..	32	49	70	38	30
Gonococci ..	51	180	203	121	15	2,648	3,657	4,886	5,393	3,922
Wasserman ..	276	306	228	426	480	15,670	14,389	18,459	17,794	20,540
Others ..	2	..	1	..	2	122	347	625	1,008	1,650
Total ..	330	486	432	548	497	18,472	18,442	24,040	24,233	26,142

LONDON COUNTY COUNCIL.

Venereal Diseases.

Summary of work done by the Hospitals during the year 1925.

	London.	Middle- sex.	Essex.	Surrey.	Kent, Herts.	Bucks.	East Ham.	West Ham.	Croydon.	Total.	Other Places.	Grand Total.
New Patients:—												
Syphilis ..	4,284	375	216	152	143	31	44	120	33	5,454	448	5,902
Soft Chancre ..	169	9	8	11	3	..	5	5	..	212	67	279
Gonorrhœa ..	8,625	677	336	294	203	34	86	198	35	10,550	771	11,321
Not Venereal..	6,508	638	339	245	152	35	97	238	70	8,387	293	8,680
Total ..	19,566	1,699	899	702	501	100	232	561	138	24,603	1,579	26,182
Total attendances ..	539,353	33,633	15,143	15,144	7,933	1,303	14,314	10,039	2,648	632,677	13,454	646,131
No. of In-patient days ..	65,902	3,342	2,819	1,471	3,349	1,155	385	1,227	96	81,335	21,119	102,454
Salvarsan Subs. doses ..	38,149	3,575	1,738	1,521	1,010	215	318	921	319	48,237	2,459	50,696

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PATHOLOGICAL EXAMINATIONS.

For or at Centres:—												
Spirochaetes ..	1,153	50	6	34	1	5	5	4	2	1 268	62	1,330
Gonococci ..	48,923	2,034	1,670	1,297	1,037	178	437	910	317	57,150	1,652	58,802
Wasserman ..	25,014	1,597	930	960	585	125	207	495	209	30,426	1,177	31,603
Others ..	11,918	572	237	801	236	71	32	39	114	14,110	219	14,329
Total ..	87,008	4,253	2,843	3,092	1,859	379	681	1,448	642	102,954	3,110	106,064
For Practitioners:—												
Spirochaetes ..	20	2	..	8	..	..	..	..	..	30	..	30
Gonococci ..	2,386	251	140	453	35	4	30	15	602	3,922	5	3,927
Wasserman ..	15,636	2,011	955	571	101	100	172	480	465	20,540	170	20,710
Others ..	1,416	47	22	132	18	3	1	2	2	1,650	29	1,679
Total ..	19,458	2,311	1,117	1,164	154	107	203	497	1,069	26 142	204	26,346

Venereal Diseases.

Summary of the work done at the London Clinics for all areas from 1917.

Year.	New Cases.						Total Venereal Cases.		Total Non-Venereal Cases.		Total Attendances.		In-patient days.		Pathological Examinations for	
	Syphilis.		Soft Chancres.		Gonorrhoea.		M.	F.	M.	F.	M.	F.	M.	F.	Clinic.	Practi- tioners.
	M.	F.	M.	F.	M.	F.										
1917	4,427	3,351	199	11	3,830	1,207	8,456	4,569	1,192	1,168	120,659		63,923		13,988	3,649
1918	3,764	3,002	116	13	4,844	1,940	8,724	4,955	1,345	1,348	169,485		66,095		25,973	6,380
1919	6,394	3,391	463	18	10,441	2,440	17,298	5,849	3,418	1,700	201,626	106,096	24,025	49,186	51,554	10,464
1920	6,988	3,579	766	25	10,669	2,427	18,423	6,031	4,403	2,189	329,940	134,093	29,430	52,182	58,920	14,027
1921	5,088	3,100	458	13	8,573	2,136	14,119	5,249	3,696	2,354	357,503	138,706	30,272	49,420	66,134	18,472
1922	4,207	2,600	309	12	8,233	2,402	12,749	5,014	3,759	2,191	387,631	141,372	28,809	83,755	74,022	19,836
1923	4,497	2,631	311	4	9,043	2,520	13,851	5,155	4,167	2,477	412,915	142,594	29,661	77,001	69,784	24,403
1924	4,174	2,452	301	4	8,565	2,785	13,040	5,241	4,869	2,423	424,850	164,152	31,620	70,836	79,005	24,797
1925	3,556	2,346	268	11	8,464	2,857	12,288	5,214	5,726	2,954	459,011	187,120	29,313	73,141	106,064	26,346

Venereal Diseases.

Utilization of Facilities at Hostels, 1925.

Particulars of the work done on behalf of the participating authorities, by the Hostels in the Scheme for the year ended 31st December, 1925. These institutions are as follows:—

Royal Free, 22 Highbury Quadrant, N.

Royal Free, 62, Regents Park Road, N.W.

St. Thomas', 148 Lambeth Road, S.E

Southwark Diocesan, 80 Stockwell Park Road, S.W.

Salvation Army, 4 Clapton Common, E.

Salvation Army, 17 Highbury Terrace, N.

West London Mission, 35 Parkhurst Road, N.

The following table shows the allocation of the patients received at these institutions to the areas in the Scheme:—

AREA.						No. of Patients.	Aggregate No. of days in residence.	Percentage (days).
London County	..	..	..	..	..	161	13,704	59·7
Middlesex	..	..	..	..	..	24	2,536	11·0
Kent	..	..	..	..	..	23	2,229	9·7
Essex	..	..	..	..	..	25	1,767	7·7
Surrey	..	..	..	..	..	15	1,364	5·9
Herts	..	..	..	..	..	10	886	3·9
Bucks	..	..	..	..	..	3	278	1·2
East Ham	..	..	..	..	..	1	143	·6
West Ham	..	..	..	..	..	1	61	3
Croydon	..	..	..	..	..	..	..	..
Totals	..	..	..	..	..	263	22,968	100·0

Maternity and Child Welfare.

The activity of the Council in respect of the condition of the health of expectant and nursing Mothers and of children under 5 years of age, is carried out in conjunction with several voluntary and other organisations, the chief of which is the Plaistow Maternity Charity, whose nurses attend nearly 50 per cent. of the total births occurring in the Borough—either in the Maternity Hospital at Howards Road, or in the patients' own homes. This organisation is subsidized by the Council and there is a definite working arrangement between them and the Medical Officer of Health in order to prevent any overlapping of visiting between the Council's Health Visitors and the Plaistow Maternity Charity workers.

There is at present only one Municipal Infant Welfare Centre, viz., at Silvertown, which is visited by Dr. Tivy on every other Friday, and by the Health Visitors twice weekly.

Several Infant Welfare Clinics are functioning in different parts (see attached table) all of which are subsidized by the Council and work in close co-operation with the Medical Officer of Health and Health Visitors. I should like to tender to the Doctors and Staff of these various Societies my sincere thanks for the great help given by them to this branch of my Department, and to congratulate them on the good work they are doing.

A Maternity block was opened in 1923 at the Queen Mary's Hospital for the East End in 1923. The Council retain 10 beds in this block—which is one of the most up-to-date in the whole country. Ten beds are also retained at the Plaistow Maternity Charity Hospital, which, though not so modern a building as that just mentioned, is none the less every bit as modern as regards the treatment placed at the disposal of the patients.

Children under five years of age are, by agreement, treated at St. Mary's Hospital, Plaistow (see attached list of cases admitted during 1925).

Orthopædic treatment was instituted in March, 1924, and is carried out at the Invalid Crippled Children's Society Hospital, Balaam Street. Up to the end of 1925, 18 cases under 5 years of age had been treated.

The Forest Gate Sick Home (an Institution belonging to the West Ham Guardians) has a Maternity block where a large number of confinements take place, including those taking place in respect to unmarried mothers.

SUNLIGHT CLINIC.—The Women's League of Service for Motherhood in July, 1925, started a Sunlight Clinic in their Institution at Welfare Road. This Clinic is subsidized by the Council. I append some extracts from the report issued concerning the Clinic:—

“ The patients for the Sunlight Clinic come
“ from the rickety, backward and debilitated
“ children of poor homes and poor parents.”

“ The majority of the children have certainly
“ improved, their weights have gone up, there is
“ more colour in their cheeks, their eyes are brighter,
“ they smile and laugh more; they are more alert
“ and observant, their muscles are firmer and they
“ stand and walk more steadily. The parents
“ report that they sleep better and their appetite
“ is improved.”

As stated in the first section of this report, the Maternal mortality is 2.85, which is distinctly low, considering the conditions pertaining in this area. Every case of death during child-birth and every case of death in an infant is fully enquired into by a Health Visitor, and the circumstances reported to me. Recently, Dame Janet Campbell, Senior Medical Officer of the Ministry of Health, has begun an investigation into the causes of premature birth; the Council's staff are lending all possible assistance in this highly important matter.

“ HOME HELPS,” is the name given to women who are employed by the Council to assist in the homes during the lying-in period of certain necessitous women. These “ helps ” are specially selected and approved by the Health Visitors as being suitable for the work. A list of such available women is kept at the Town Hall, any person concerned being entitled to see this list as an aid to the selection of a suitable Home Help. The work of these women is closely supervised by the Health Visitor, and only those people from homes clean and free from infectious disease are allowed to come to the lying-in patient. The Health Visitor also visits the house several times during the stay of the Home Help in the house, in order to see that she performs her duties and also to give any advice needed. The duties of these women are briefly set out in the following form, a copy of which is handed to each one on her accepting duty. The object of the quick return of the intimation of the commencement of duties is in order that the Health Visitor

may at once get into touch with the case, for obviously the expectant mother sends first for her doctor, midwife, or home help, and it might be many days before the Health Visitor got to know that the birth had occurred.

COUNTY BOROUGH OF WEST HAM.

DUTIES OF HOME HELPS.

1. To act under the direct supervision of the Health Visitor.

2. To be at hand at the time of labour and confinement: to see that the patient's room is clean and everything in readiness for the arrival of the Doctor or Midwife. The Home Help is not responsible for the confinement itself, nor must she interfere in any way with the instructions of the Doctor or Midwife.

3. After the confinement, to remove all soiled linen from the patient's room, and to care for her generally, especially as regards cleanliness and food.

4. To see that the infant is properly fed and cared for, and, if possible, put to sleep in a separate cot.

5. To wash and dry the labour clothes as soon as possible and to keep the ordinary clothes washed in the usual way: to get meals and tidy the house as the patient would, were she not for the time laid aside.

6. To care for any other children there may be and see that school children attend punctually and are clean and tidy.

7. Should the Home Help in any way come into contact with a case of infectious disease, either in her own home, the home of the patient, or elsewhere, she must at once report the matter to the Medical Officer of Health.

8. *On the day following the confinement*, the Home Help must notify the Medical Officer of Health (Town Hall, Stratford, E.15), that she has commenced her duties.

9. Any conduct on the part of the Home Help which is contrary to the interests of the person she is helping, may lead to her name being removed from the list of Home Helps, and render her liable to forfeit the payment due to her.

Town Hall,
West Ham.

F. GARLAND COLLINS,
Medical Officer of Health.

To :

The Medical Officer of Health,

Town Hall, Stratford, E.15.

*In accordance with my agreement to act as Home Help
to Mrs. of
I hereby inform you that I began my duties on the
day of 192.....*

Signed

Home Help's Address

Detach this slip and forward as directed above.

During 1925 there were 1,592 applications for the grant of a Home Help. All these applications were investigated as to the eligibility of the applicant for the grant and a " Help " was granted to 1,367 of the applicants, 217 being ineligible and the application withdrawn in eight cases. I am firmly of opinion that this is an extremely useful measure, and saves many women from getting up too soon after their confinement, with often its consequent chronic ill-health due to " pelvic " trouble.

A number of children under five years of age are sent to convalescent homes at the expense of the Council through the I.C.A.A. and I.C.C.S. These children are all examined by the Senior Assistant School Medical Officer who gives a certificate which states the length of convalescent treatment necessary.

SCHOOL MEDICAL SERVICE AND MATERNITY AND CHILD WELFARE.

In the early part of the year a very efficient linking-up of the Maternity and Child Welfare Scheme with the School Medical Service was effected. A weekly list of all children attending school for the first time is sent to the Medical Officer of Health by the Bye-Laws (School Attendance) Department of the Education Committee. From this list the Infant Welfare card of each child is procured. This card, which contains full particulars of the infant's medical history from birth, is transferred to the School Medical Department

and then passed, with the School Inspection Medical Card, to the Head-Teacher of the particular school to which the child has been admitted and is produced at the next medical inspection of the scholars by the Assistant School Medical Officer.

There were eight deaths during 1925 from Puerperal Fever amongst 7,017 births. Considering the condition of the homes in which many of the women are confined, I consider that this is a remarkably low percentage of deaths, and that it redounds to the credit as to the care taken by the General Practitioner and Midwife. The fact remains, though, that there should not be any deaths from Puerperal Fever which, under proper circumstances, is a preventable disease.

PEMPHIGUS NEONATORUM.—During the year, a very considerable number of cases of Pemphigus Neonatorum has occurred: the first case was brought to my notice during August of last year, and up to January, 1926, 15 such cases have been notified, though there have occurred a number of other cases which were not notified, but which have come to my knowledge through the Health Visitors. Of the 15 notified cases, 6 were born in Queen Mary's Hospital, 7 were attended by the Plaistow Maternity Charity, and the remaining 2 occurred in the practice of a private midwife, in September last. (There has been no further case in the practice of this midwife since.) In the series of cases under review the complaint began between the 5th and 10th day after birth, with the occurrence of an inflamed lozenge-shaped area, with no definite site: this inflamed area within the space of a few hours resolved itself into a raised blister containing clear watery serum. In some cases only one blister occurred, in others a large number occurred, but with no uniform distribution. Most of the infants were in fair general health during the attack and able to take their feeds well. In two of the 15 cases death occurred, the rash having spread rapidly over the whole body, becoming confluent and then postulate, death supervening within a few days. Every case has been, as far as practicable, carefully investigated, but in no instance has any definite source of infection been established. I am strongly of opinion that this complaint should be made compulsorily notifiable. No case occurred amongst either the mothers or any other adults. All the babies were breast fed. I am still further investigating this outbreak with a view to obtaining, if possible, some scientific data.

The South West Ham Health Society established an Ante-natal Clinic at their Infant Welfare Centre, Lees Hall, two years ago. The following is an extract from the last annual report of this Society:—

“ Our experience during these two years is that
 “ the health of the mother is greatly improved
 “ during pregnancy and that confinement is made
 “ easier.”

This Society also holds Mother-craft classes. The percentage of West Ham mothers who breast-feed their babies is very big indeed and is steadily increasing (see table below).

Table showing how babies are fed.

YEAR.				No of Infants Breast Fed.	No. of Infants Breast Fed and Supplementary Feeds.	Entirely Artificially Fed.
1923	..	..	..	3,173	1,047	510
1924	..	..	..	4,354	948	460
1925	..	..	..	4,754	855	597

Distribution of Milk to Nursing and Expectant Mothers and Children under 3 years of age.

This branch of the Council's service has now been in operation for five years, and in order to give some idea of the steady growth of this Department during the period under review the following particulars will, I hope, prove interesting:—

On the 1st January, 1920, as a result of a conference with Milk Retailers in the district an arrangement was agreed upon for the exchange of the Council's Vouchers for a supply of milk to expectant and nursing mothers, and children under five years, so that during the first part of the year liquid milk to the extent of 76,764 gallons was supplied to such cases as fell within the Council's scheme. During August of the same year the Council decided to substitute

full cream dried milk powder for liquid milk, and for the remainder of the year dried milk was supplied in one-pound packets.

The milk powder is received in bulk in hermetically sealed cannisters and is packed into grease-proof bags enclosed in cartons on which printed directions are given, and only the estimated required quantity is packed daily in order to ensure, as far as possible, the milk being fresh when supplied to applicants from the following centres:—

84, West Ham Lane, Stratford.

Public Hall, Barking Road, Canning Town.

Nurses' Home, Howards Road, Plaistow.

Barnwood Road, Silvertown.

When the scheme was first put into operation the Town Hall, Stratford, was used as a distributing centre, but owing to the lack of accommodation at the Town Hall for dealing with the public the Maternity and Child Welfare Committee approached the Education Committee with a view to obtaining the unused portion of a hut situate at 84, West Ham Lane for the purpose of packing and distribution. This was eventually acquired, fitted up and opened on the 8th September, 1924; it has proved a great convenience both from the public and administrative points of view.

Since Dried Milk has been distributed under the Maternity and Child Welfare Scheme, viz., from August, 1920, the amount has steadily increased as the following table indicates:—

Year 1920—	18,247 packets or 8 tons 3 cwts.
„ 1921—	73,872 „ 33 tons.
„ 1922—	127,934 „ 57 tons 2 cwts.
„ 1923—	221,114 „ 98 tons 14 cwts.
„ 1924—	237,963 „ 106 tons 4½ cwts.
„ 1925—	222,410 „ 99 tons 5 cwts. 90lbs.

Although the following extract of a circular “What every Nursing Mother ought to know,” has appeared in previous

reports I think this brief summary of particulars covering five years would be incomplete without it. The circular is issued with a view to making the Council's Dried Milk scheme more generally known and there can be no doubt that the many advantages and beneficial results obtained by its use has been realised by hundreds of parents residing in the Borough.

Circular 185 of the Ministry of Health, dated 31st March, 1921, has been followed and samples of Dried Milk from each consignment have been submitted to chemical analysis and bacteriological examination. Stock books, authorised vouchers, showing receipts and issues are kept and monthly stocktakings are carried out.

DRIED MILK.

What every Nursing Mother ought to know.

The Council are selling Full Cream Milk in a dried form suitable for infants and nursing mothers.

Dried Milk is a valuable food (not a patent manufactured food) being good cows milk from which the moisture has been evaporated and possesses certain special advantages. Liquid milk cannot be kept for any lengthened period without undergoing changes which render it unfit for food, but Dried Milk can undoubtedly be preserved for a considerable time with practically unimpaired food value.

Dried Milk is an excellent substitute—not for breast milk, but for much of the milk upon which infants are now fed. Under present conditions pure fresh cows milk is practically unattainable in most towns, and in view of the liability to bacterial changes in fresh milk when kept in the ordinary dwelling-house, especially in hot weather, it is often desirable to use dried milk in preference.

By its use waste is preventable; the exact quantity can be made up as and when occasion requires.

The processes used in drying milk largely reduce the number of bacteria present and materially decrease the risk of conveyance of disease from tuberculous milk, a very common cause of tuberculosis in children.

Mortality figures showing comparison of death rate between children fed on Dried Milk and other hand-fed children are strikingly in favour of the use of Dried Milk.

Scurvy and Rickets are rare in infants fed on Dried Milk and their occurrence is probably not attributable to this form of food.

Full Cream Dried Milk requires to be mixed with about seven parts by weight of water to give a mixture corresponding to ordinary milk. Therefore, 5 ozs. of Dried Milk should reconstitute to correspond to one quart of milk.

Dried Milk is cheaper than liquid milk and it is sold by the Council at cost price for the safeguarding of the health of young children and nursing mothers.

Dried Milk can be obtained from the Town Hall, Stratford, by Nursing and Expectant Mothers for their own consumption or for the use of children under three years of age in accordance with a Scale adopted by the Council. Dried Milk can also be obtained from the Town Hall for the use of children between three and five years of age, but in such case a medical certificate must be supplied in respect of each child.

Any nursing mother experiencing difficulty in preparing the milk should send a Post Card to the Medical Officer of Health at the Town Hall, Stratford, when a Health Visitor will call and give all the information necessary.

Maternity and Child Welfare.

MIDWIVES—

Number practising in district:

Trained, 118; Untrained, 1. *Bona fide*, 1904.

Number of cases attended in 1925, 4581.

Number of cases in which Medical Aid was summoned, 761.

HEALTH VISITORS—

Visits paid during 1925:

To Expectant Mothers. First visits, 1,792. Total visits, 2177.

To Infants under 1 year. First Visits, 4,264. Total visits, 18,471.

Children 1-5. Total visits, 21,987.

MATERNITY HOMES (Subsidised by Council)—

(1) Queen Mary's Hospital. Number of beds, 10.

(2) Plaistow Maternity Charity. Beds, 10.

Number of cases received during 1925:

(1) Queen Mary's Hospital, 375.

(2) Plaistow Maternity Charity, 498.

Number of weeks spent in Hospital by such cases:

(1) Queen Mary's Hospital, 654.

(2) Plaistow Maternity Charity, 996.

HOSPITAL FOR CHILDREN UNDER 5 YRS. (Subsidised by Council)—

(1) St. Mary's Hospital. Number of beds, 10.

(2) Children's Hospital, Balaam Street. Number of beds, 10.

Number of Children admitted to

(1) St. Mary's Hospital, 308

(2) Children's Hospital, Balaam Street, 44.

Number of weeks spent by Children in

(1) St. Mary's Hospital, 710.

(2) Children's Hospital, Balaam Street, 235 4/7.

Number of Children under 5 years in Homes and Hospitals outside Borough, 23.

Number of weeks spent in such Homes, 204.

WELFARE ROAD DAY NURSERY (Subsidised by Council)—

Half-days, Nil. Whole days, 236. Average per day, 30.56.

CENTRES AND CLINICS (Subsidised by Council except Silvertown Municipal Clinic)—

ADDRESS.	No. of Sessions held weekly.	Day and time of meeting.	Average per Session.		Present arrangements for Medical Supervision.
			Expectant Mothers.	Children.	
Chesterton House	4	Mon., Wed., Thurs., Fri., 1.30 p.m.	90 05	69.03	Dr. Kennedy.
St. Luke's Square	2	Tuesdays & Fridays, 3 p.m.	70 90	141.17	„ Hogg.
Martin Street	1	Thurs., 3.30 p.m.	28.61	48.75	„ Hogg.
S. W. Ham Health Society	3	Tues., Wed. & Friday, 1.30 p.m.	15 01	65.79	„ Lorimer. Hawthorne.
Trinity Mission ..	2	Wed. & Thurs., 1.30 p.m.	2.36	41 03	„ Margaret Alden.
Women's League of Ser. (Welfare Road).	3	Mon., Wed. & Fri., 2 p.m.	5.96	34.20	„ Dorothea Brooks.
Silvertown Munpl. Centre	1	Wed., 2 p.m.	—	15.15	„ Tivy.
Given-Wilson Ins.	1	Mondays, 2 p.m.	—	25.47	„ Eva Morton

NUMBER OF WEST HAM BIRTHS.

1921.	1922.	1923.	1924.	1925.
8,242	... 7,959	... 7,803	... 7,202	... 7,017

OPHTHALMIA NEONATORUM.

	CASES.					
Notified.	Treated.		Vision un- impaired.	Vision impaired.	Total Blindness.	Deaths.
	At Home.	InHospital.				
34	33	1	33	1	0	0

The following gives the number of cases of Ophthalmia Neonatorum notified in the previous four years:—

1921.	1922.	1923.	1924.
61	34	31	24

Year 1925.

MIDWIVES ACT, 1902 AND 1918.

Midwives practising for Associations or privately.	Number giving notice of intention to practise.	Number of Births attended.	Number of Records of sending for Medical Aid.
Plaistow Maternity Charity	55	2,838	566
Essex County Nursing Association (Beech- croft Nurses)	29	115	9
Salvation Army Nurses	5	403	49
Tate Nurses' Institute	6	161	19
Queen Mary's Hospital (Extern.)	10	173	17
Private Practice:			
<i>a.</i>	1	47	4
<i>b.</i>	1	8	0
<i>c.</i>	1	302	23
<i>d.</i>	1	126	23
<i>e.</i>	1	180	30
<i>f.</i>	1	86	4
<i>g.</i>	1	109	13
Resident outside Borough but practising within:			
1.	1	28	4
2.	1	0	0
3.	1	3	0
4.	1	0	0
5.	1	1	0
6.	1	1	0
	118	4,581	761

Analysis of "Records of sending for Medical Aid,"
Year 1925:—

<i>Pregnancy—</i>		<i>Lying-in—</i>	
Abortion or Threatened		Fits	—
Abortion	16	Unsatisfactory condition..	35
Ante-partum Hæm.	30	Temp. raised	35
Dangerous varicose veins	1	Breasts swollen	2
Albuminuria	5	Secondary P.P. hæmorr...	—
Excessive sickness	2	Swollen and painful veins	15
Unsatisfactory condition..	4		
<i>Labour—</i>		<i>Child—</i>	
Plac. prævia	2	Deformity	9
Pres. or prolapse of cord	2	Dangerous feebleness	25
Mal-presentation	27	Inflam. or disch. from eyes	41
Fits	3	Skin eruptions	11
Excessive hæmorrhage ...	34	Unsatisfactory condition..	71
Retd. plac. or membranes	56	Prematurity	35
Prolonged labour	111	Asphyxia	8
Ruptured perineum	156	Fits	7
Unsatisfactory condition..	35		
Erysipelas and sores on			
genitals	1	Total	779

List of Complaints of Children under 5 years of age treated at
St. Mary's Hospital, and Children's Hospital (Balaam St.):—

ST. MARY'S HOSPITAL.

Abdominal Pain	1	Cellulitis	2
Abscess of—		Celiac Disease	1
Elbow	1	Concussion	1
Empyema Scar	1	Congenital Heart	5
Groin	3	Conjunctivitis	2
Leg	2	Constipation	2
Neck	4	Convulsions	5
Acute Gastritis	1	Corneal Ulcer	6
Appendicitis	1	Cut Tendon, R. Hand	1
Axillary Abscess	2	Dermoid Cyst	2
Bow Legs	1	Discharging Eyes	1
Bronchial Pneumonia	10	Double Hip Disease	2
Bronchitis	26	Empyema	3
Bruised Face	1	Enteritis	55
Catarrh	1	Erbs. Paralysis	1

For observation	1	Otorrhœa	1
Fractured Humerus	1	Paralysis	1
Gland of Neck	1	Peritonitis	1
Hæmaturia of the New		Periostitis	1
Born	4	Persistent Screaming	1
Harelip	1	,, Vomiting	1
Henochs Purpura	1	Pleurisy	1
Hernia	44	Pneumonia	11
High Temperature	1	Prolapse, Rectum	2
Hydrocele	3	Pyloric Stenosis	1
Influenza	1	Pyrexia	2
Injury to—		Quinsey	1
Palate	1	Rheumatism	2
Shoulder	1	Ricketts	1
Impetigo	1	Scald of—	
Indigestion	1	Buttocks, etc.	4
Intussusception	7	Hand	1
Jaundice	1	Septic Forehead	1
Lacerated Scrotum	1	,, Hand	1
Laryngitis	1	,, Wound	1
Lobar Pneumonia	1	Skin	1
Marasmus	14	Stomatitis	3
Mastoid	8	Strabismus	3
Measles	2	Sub-Ling. Abscess	1
Meningitis	2	Swelling over Fibula	1
Neavus, R. Thigh	1	Tenotomy	1
Necrosis, Finger	1	Tonsils and Adenoids	8
Nephritis	1	T.B. Hip	1
Nystagmus	1	,, Meningitis	4
Osteoclasia	1	,, Peritonitis	1
Osteomyelitis	1	Whooping Cough	2
Otitis Media	2		

CHILDREN'S HOSPITAL, BALAAM STREET.

A.P.M.	1	Neavus	2
Appendicitis	1	O.C.T.	1
Bronchitis	2	Otorrhœa	10
Circumcision	1	Ricketts	3
C.T.E.V.	4	Spinal Caries	1
Dorsal Caries	1	Tonsil and Adenoids	1
D.V.	1	T.B. Hip	2
Fractured Skull	1	,, Peritonitis	1
Malig. Endocarditis	1	Vomiting	1

**Deaths from the under-mentioned Diseases, 1921-1925
inclusive, in Children, under 5 years**

YEAR.				Measles.	Bronchitis.	Whooping Cough.	Epidemic Diarrhoea.	Prema- turity.
1921	..	..	..	9	47	36	165	257
1922	..	..	..	109	86	171	48	184
1923	..	..	..	11	28	23	76	197
1924	..	..	..	108	37	82	76	170
1925	..	..	.	30	29	78	95	142

The above table is of interest, and is chiefly remarkable for the big fall in the number of deaths from Prematurity, though, as intimated earlier in this report, it is lamentable that so many deaths should still occur from this cause (see p. 11†).

During the past five years the work of the Maternity and Child Welfare has been consolidated and co-ordinated with other Health Agencies to a remarkable degree. The combined toil of many workers on behalf of the mothers and babies is now beginning to bear fruit. The one-time resentment of the young mother to any sort of advice respecting her child has disappeared. Though hard things are still said in respect to the Health Visitors by some ill-informed persons, in most homes in this Borough they are welcome visitors, and daily at the Town Hall there are enquiries from people seeking their help.

The need of more dental treatment is very essential. I am informed by my School Dentists that much of their time is spent in trying—often ineffectually—to remedy the ravages to the child's teeth caused by ill-attention before school age; further, much of the distress and ill-health caused by enlarged tonsils is attributable to non-attention to the teeth during infancy. A definite system for the supervision and treatment of infants' teeth is sadly needed, and also, though to a lesser degree, some scheme for the care of the mother's teeth.

The Maternity and Child Welfare Committee have obtained the sanction of the Ministry of Health to appoint a new Lady Doctor, and to establish a new Municipal Ante-natal and Infant Welfare Centre in West Ham Lane. In the very near future both these things will be accomplished, and a further important step taken towards safe-guarding the health of pregnant women, and of helping mothers to bring up into healthy and useful citizens those children whom they have gone through so much to bring into the world.

APPENDIX.

Mental Deficiency Act, 1913.

On the 31st December, 1925, the number of Mental Defectives on the Register numbered 223. Males 127, Females 96.

Number actually in Institutions, 96. Males 58, Females 38.

Number under supervision, 127. Males 69, Females 58.

Thirty-four new cases were dealt with during 1925, as follows:

Recommended Institutional Treatment, 16.

Males 5, Females 11.

Recommended supervision at home, 4

Males 1, Females 3.

Recommended no action necessary, 14.

Males 9, Females 5.

Number awaiting Institutional treatment 31/12/25, 17.

Males 5, Females 12.

Number discharged during the year, 2.

Males 2, Females 0.

Number removed to other areas, 1.

Males —, Females 1.

Number died during the year, 3.

Males 2, Females 1.

Number removed to other areas, 1.

Males —, Females 1.

Cases notified by the Local Education Authority under Sec. 2

(1) (b.) (v) during the year, 12.

Males 4, Females 8.

Nine cases were admitted to Institutions, of which number four were notified to the Local Authority prior to 1/1/25, and five notified during 1925, 9.

Males 5, Females 4.

During the year 20 Continuation Orders were received as follows:—

For 5 years, 13. Males 7, Females 6.

For 1 year, 7. Males 2, Females 5.

Very great difficulty has been, and is still being experienced in obtaining suitable Institutions for Mental Defectives owing to lack of accommodation.

The above lists do not include mentally defective children being dealt with under the Education Acts.

